

Request for Early Years Inclusion Funding 2022-23



Notes for use: please complete electronically, text boxes will expand to fit your text. Where check boxes appear, insert an 'X' in those that apply.

Full name:

Date of birth:

**Resident
borough:**

Gender:

Address:

**Name of parent
with parental
responsibility:**

**Name of parent
with parental
responsibility:**

**Relationship
to child:**

**Relationship
to child:**

Contact details:

Contact details:

Setting:

**Name of person
completing form:**

Role:

Start date:

EY Entitlement:

Ethnicity:

White - English, Welsh, Scottish, Northern Irish or British WBRI	Mixed - White and Black Caribbean MWBC	Asian – Indian AIND	Black – African BAFR	Other – Arab OARA
White - Irish WIRI	Mixed - White and Black African MWBA	Asian – Pakistani AOPK	Black – Caribbean BCRB	Any other ethnic Group OOTH
White - Gypsy or Irish Traveller WROM	Mixed - White and Asian MWAI	Asian – Bangladeshi ABAN	Other Black, African or Caribbean background BOTH	Prefer Not to Say REFU
Any Other White Background WOTH	Any other Mixed or Multiple ethnic background MWAO	Asian – Chinese CHKC	Any other Asian background AAFR	

Why does the child need inclusion funding? Provide a description of needs including examples. Please only complete relevant sections.

Cognition and Learning:

Communication and Interaction:

Social, Emotional and Mental Health:

Physical and sensory:

What has been done already?

Universal and Targeted Interventions Implemented (see Best Practice Guidance)

Impact:

What Training /Advice relating to the child's needs have practitioners in the setting accessed?

Relevant Training/Advice and Date:

How it was/will be embedded:

How you will use inclusion funding to support the child?

See Best Practice Guidance or Professional Reports.

**Cognition and
Learning:**

**Communication
and Interaction:**

**Social,
Emotional and
Mental Health:**

**Physical and
Sensory:**

Please indicate the external agencies involved.

Please attach any relevant reports not older than 12 months. Include the name of the worker and contact details, if applicable.

Portage:

Area SENco:

**Speech & Language
Therapy**

**Occupational
Therapy:**

Physiotherapy:

**Educational
Psychology:**

**Hearing Support
Team:**

**Vision Support
Team:**

Early Help:

Social Care:

Other:

Data Protection Act 2018 Right to be Informed - Privacy Notice

Organisation collecting your information:	Haringey Council's Record of Processing Activities sets out full details of why and how we use personal information. You have a right to access the information that we hold and have inaccurate information corrected. Please see the information on the Data Protection section of our website for details of our processing activities, your legal rights relating to how we use your personal data and how to exercise those rights.
Why we need your personal information:	We need your child's personal information so that we can award you with Early Years Inclusion Funding
Data Protection Act 2018 basis for processing:	Processing is necessary for compliance with a legal obligation
Details of statutory or contractual obligation:	Children and Families Act 2014 (section 3), Education Act 1996
Consequences of not providing the information :	Haringey Council will not be able to allocate your child with Early Years Inclusion Funding
Who we might share your information with:	Haringey Council Staff, Education Staff
How long we will we keep your information :	25 years from DOB

Parent/Carer Confirmation

I confirm that the request for top-up funding to support my child has been fully discussed with me and that I have read and understand the attached information supporting the request. I agree to Haringey Council sharing this information with relevant agencies.

Print name:

Signed:

Date:

Completed by:

Print name:

Signed:

Date:

Essential Evidence

Requests for funding will only be considered with an evaluated Early Support Plan (s) which shows clearly how the setting and parents/carers have worked in partnership.

If you are unable to provide this, please give the reason why:

Early Support Plan(s)

Recent reports from other professionals

Application Dates

	Deadline to Submit Form	Funding Starts	Deadline for Review
Autumn Term 2022	9th July 2022	1st September 2022	2nd December 2022
	7th October 2022	31st October 2022	17th March 2023
Spring Term 2023	2nd December 2022	1st January 2023	17th March 2023
	6th February 2023	20th February 2023	7th July 2023
Summer Term 2023	17th March 2023	27th March 2023	7th July 2023
	12th May 2023	5th June 2023	5th December 2023
	7th July 2023	1 September 2023	5th December 2023

When completed send this form to EYTopUp@haringey.gov.uk.