# DCC logo purpleApplication Form 2

# Application form for 30 hours free childcare for children in foster care - partner is not a foster carer

**If you are a friend or family member who has become the guardian of a child or there is a Special Guardianship Order in place you should make your application through HMRC at:** [**www.childcarechoices.gov.uk**](http://www.childcarechoices.gov.uk)

**You should only use this form if you are a foster carer, but your partner is NOT a foster carer.**

**In order to be eligible to apply for the 30 hours extended entitlement you and your partner (if you have one) must be working outside of your role as a foster carer and be able to evidence this with pay slips, etc and the offer must be consistent with the child’s care plan.**

1. Before applying for the 30 hours extended entitlement funding you must speak to the child’s social worker to confirm that the offer is consistent with the child’s care plan. If the child’s social worker agrees, complete this form.
2. Upon completion you and your partner (if you have one) must sign the form.
3. The form also needs to be counter-signed by your child’s social worker before submission.
4. Submit your completed application either by post to, The Sufficiency Team, Early Years’ Service, County Hall, 88 Smedley St, Matlock DE4 3AG

or email info.fis@derbyshire.gov.uk together with evidence of employment, for example, copies of payslips for the last three months; a letter confirming appointment within the next 31 days, evidence of being in receipt of certain benefits.

1. If your application is successful, you will receive your 11-digit eligibility code by e-mail from Derbyshire County Council within 10 working days of the ECS Administrator receiving the form.
2. The code will be valid from the beginning of the term following that on which the completed application was received by the ECS Administrator.

For further information email info.fis@derbyshire.gov.uk

**This application form is only for children in foster care**. If you are applying for your own children use the childcare service: [www.gov.uk/help-with-childcare-costs](http://www.gov.uk/help-with-childcare-costs).

## Section 1 – About you

1.1 Your details:

|  |  |
| --- | --- |
| **Title** |  |
| **First name** |  |
| **Last name** |  |
| **Date of birth (DD/MM/YYYY)** |  |
| **National Insurance number** |  |
| **Address** |  |
| **Postcode** |  |
| **Email address** |  |
| **Telephone number** |  |

We need your address and email to send your 30 hours free childcare eligibility code.

1.2 Are you a foster carer of the children named in this form?

Yes

No

1.3 Do you and the child/ren live in England?

Yes

No

If no, speak to your local council about what childcare schemes are available in your area.

1.4 Are you a British/Irish national?

Yes

No

1.5 If you have answered “no” to 1.4:

[ ]  Have you acquired settled or pre-settled status through the EU Settlement Scheme (EUSS).

[ ]  Have you made an application through the EUSS and are waiting for a decision, or;

[ ]  Are you appealing a decision on your EUSS application?

1.6 Are you subject to immigration rules that prevent you from receiving public funds?

Yes

No

1.6 Does the foster child/ren currently attend an early year’s provision?

Yes

No

If yes, please provide name and address of this provision below.

|  |
| --- |
|  |

## Section 2 – Your employment details

2.1 Are you employed or self-employed outside of your fostering responsibilities?

Yes

No

If yes, please provide evidence for example, copies of payslips for the last three months.

If you are self-employed, please provide a copy of last year’s tax return.

You can still answer yes if you are expecting to start work, but evidence is required, for example, a letter confirming your start date within the next 31 days.

You can still answer yes if you are not currently working. For example, if you are on parental leave or sick leave or expect to re-start work in the next 31 days. Please submit evidence with your application form.

2.2 If you are **not** employed outside of your fostering responsibilities, select any of the following that apply to you.

If you are in receipt of one of these benefits you may still be able to get 30 hours free childcare if you have a partner who is engaged in paid additional employment **outside their role as foster carer.**

 For Universal Credit purposes, I am assessed as having limited capability for work

 I receive National Insurance credits because of incapacity or limited capability for work

 I receive a Carer’s Allowance

 I receive an Employment and Support Allowance

 I receive Incapacity Benefit

 I receive a Severe Disablement Allowance

**Please submit evidence with your application form.**

2.3. Do you expect to earn more than £100,000 in this tax year (April to March)?

If your income is over this amount you cannot get 30 hours free childcare.

Yes

No

2.4 Do you have a partner who lives with you?

A person is your partner if you are married or in a civil partnership, and live together in the same household, or a couple who live together as if you are married or in a civil partnership.

Yes

No

If **Yes**: go to section 3.

If **No**: go to section 5.

## Section 3 – Your partner

3.1 Your partner’s details

|  |  |
| --- | --- |
| **Title** |  |
| **First name** |  |
| **Last name** |  |
| **Date of birth (DD/MM/YYYY)** |  |
| **National Insurance number** |  |

3.2 Is your partner a joint foster carer with you?

Yes

No

If **yes** go to section 4.

If **no,** you will need to complete a different application form which is available from enquiries.30hours@Derbyshire.gov.uk

## Section 4 – Partner’s employment details (non-foster carer)

**As your partner is not a foster carer, they will need to meet the standard eligibility for 30 hours childcare.**

4.1 Is your partner employed or self-employed?

Yes

No

You can still answer yes if they are not currently working. For example, if they are on parental leave or sick leave, or expect to start or re-start work in the next 31 days.

4.2 If you answered Yes to 4.1, which best applies to your partner, for the next 3 months:

 They are an apprentice and expect to earn at least £56 a week

 They are under 18 and expect to earn at least £64.80 a week

 They are 18 to 20 and expect to earn at least £89.60 a week

 They are 21 to 24 and expect to earn at least £112.80 a week

 They are 25 or over and expect to earn at least £120 a week

 They have started self-employment, less than 12 months ago

 They are self-employed (longer than 12 months) and have a variable income, which averaged across the year, meets the minimum income criterion for their age

 They are none of the above

4.3 If they are not employed (or answered ‘none of the above’ to question 4.2), then please select any of the following that apply to your partner.

If your partner is in receipt of one of these benefits you may still be able to get 30 hours free childcare if you hold additional employment outside your role as foster carer.

 For Universal Credit purposes they are assessed as having limited capability for work

 They receive National Insurance credits because of incapacity or limited capability for work

 They receive a Carer’s Allowance

 They receive an Employment and Support Allowance

 They receive Incapacity Benefit

 They receive a Severe Disablement Allowance

4.4 Does your partner expect to earn more than £100,000 in this tax year (April to March)?

If your partner’s income is more than this amount you cannot get 30 hours free childcare.

Yes

No

## Section 5 – The children who will get 30 hours free childcare

5.1 Foster child’s details:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **First name** | **Last name** | **Date of birth (DD/MM/YYYY)** | **When do you expect the child in foster care to join a school reception year?****MM/YYYY** | **How many hours a week have been agreed for the child to attend provision in line with the child’s care plan?** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

### Section 6 – Declaration

6.1 Your declaration:

I declare that I am applying for 30 hours free childcare, to enable me to work outside of fostering, and I have provided evidence with the application form.

Where I am **not** employed outside of my fostering responsibilities, but I am receiving certain benefits, I have provided evidence with this application form.

I declare that the information I have given on this form is correct and complete.

|  |  |
| --- | --- |
| **Name** |  |
| **Signature** |  |
| **Date (DD/MM/YYYY)** |  |

6.2 Your partner’s declaration:

I declare that I am **not** a foster carer, and I am applying for 30 hours free childcare with my partner who is a foster carer, and that the information I have given on this form is correct and complete.

|  |  |
| --- | --- |
| **Name** |  |
| **Your partner’s signature** |  |
| **Date (DD/MM/YYYY)** |  |

### Section 7 – Child’s social worker declaration

Before Derbyshire County Council can issue you with a code, this form must be counter-signed by the child’s social worker.

7.1 I confirm that I support this application for 30 hours free childcare in respect of the foster children listed in this application and that the hours specified in Section 5 are consistent with the care plan for the foster child or children.

|  |  |
| --- | --- |
| **Name** |  |
| **Signature** |  |
| **Position** |  |
| **Telephone Number** |  |
| **Email address** |  |
| **Date (DD/MM/YYYY)** |  |

Please state the Foster Carer’s Supervising Social Worker:

|  |  |
| --- | --- |
| **Name** |  |
| **Position** |  |
| **Telephone Number** |  |
| **Email address** |  |

| **Data protection statement**The data provided by foster carers to the local authority will be used to confirm eligibility for the 30 hours entitlement only.All information provided by foster carers, or their social workers will be stored electronically. All paper application forms, or supplementary evidence will be shredded. This information will be stored electronically for an indefinite period. Access to this information is restricted. |
| --- |

**For Office Use Only**

**Name of foster carer ………………………………….**

Employment evidence provided:

Offer of employment letter to commence in the next 31 days

Pay slips for the last 3 months

Contract of employment

If self-employed – tax return for the last financial year

Other - please provide details …………………………………….

Benefit evidence provided:

 For Universal Credit purposes, I am assessed as having limited capability for work

 I receive National Insurance credits because of incapacity or limited capability for work

 I receive a Carer’s Allowance

 I receive an Employment and Support Allowance

 I receive Incapacity Benefit

 I receive a Severe Disablement Allowance

**Name of partner …………………………………..**

Employment evidence provided:

Offer of employment letter to commence in the next 31 days

Pay slips for the last 3 months

Contract of employment

If self-employed – tax return for the last financial year

Other - please provide details …………………………………….

Benefit evidence:

 For Universal Credit purposes, I am assessed as having limited capability for work

 I receive National Insurance credits because of incapacity or limited capability for work

 I receive a Carer’s Allowance

 I receive an Employment and Support Allowance

 I receive Incapacity Benefit

 I receive a Severe Disablement Allowance

Signature of Designated Person: ……………………………………………………………

Date Approved: ………………………………………………………………………………..

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