Please return this form alongside your completed Hardship Funds Application Form to:
Student Funding, Senate House, University of Warwick, Coventry, CV4 7AL.

Childcare Information Form 2018-2019

Please indicate the fund you are applying to:

- International Students’ Childcare Fees Remission Scheme
- Part-time Childcare Grant
- Access to Learning Fund

TO BE COMPLETED BY THE STUDENT

Name of student: ................................................................. Student ID: ..............................................

Name of child: ................................................................. Date of birth: ........ / .......... / ........

If you are an International student, please state if you have other pre-school children in registered or approved childcare?
(If additional funds become available during the academic year, we will contact you)  Yes ☐  No ☐

Are you eligible for any help with childcare costs from another source?
  e.g. childcare vouchers from your employer.  Yes ☐  No ☐

TO BE COMPLETED BY THE CHILD CARE PROVIDER

The information below is required in order to calculate if the student is eligible for financial assistance towards nursery fees.

Date of first childcare session in the 2018-2019 academic year (01 October 2018 – 29 June 2019): ........ / ........ / ........

Days child attends per week (please specify number of full or half days):

Mornings ................................................................. Afternoons ................................................................. Full days .................................................................

Cost per day: £.................................................................................................................................

Cost of child’s weekly fees (without deductions*): .................................................................................................................................

Will 15 hours of free Early Education and Childcare be claimed for the above child during the 2018/19 funding period?
  Yes ☐  No ☐

Is the Early Education and Childcare funding applied over 38 or 52 weeks? .................................................................

*What is the weekly deduction for the funding above? .................................................................

Name of Childcare provider: ................................................................. Provider Number: .................................................................

Address: ........................................................................................................................................................................

...................................................................................................................................................................................... Post code: .................................................................

Email address: ................................................................. Telephone No: .................................................................

Name: ................................................................. Position: .................................................................

Signed: ................................................................. Date: ........ / ........ / ........