

EALING NURSERY EDUCATION FUNDING MID TERM ADJUSTMENT LEAVERS AFTER HEADCOUNT

Setting Name	Setting URN	Term		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Childs First Name	<input type="text"/>		Attendance	Claim
Childs Surname	<input type="text"/>		Hours per week	<input type="text"/>
Date of Birth	<input type="text"/>	No of days per week	<input type="text"/>	
Gender	<input type="text"/>	No of weeks left this term	<input type="text"/>	
S.E.N Code	<input type="text"/>	Total Hours	<input type="text"/>	
Ethnicity Code	<input type="text"/>	Adjustment	<input type="text"/>	<input type="text"/>
Child's Full Address	<input type="text"/>			
Postcode	<input type="text"/>			
Notes:	<input type="text"/>			
Date of last Attendance	<input type="text"/>			

I declare that the details I have given are correct. I acknowledge that should any of the details be found to be incorrect I shall cooperate fully with the London Borough of Ealing to rectify any issues.

Name:

Email:

Signed by head of organisation:

Date:

Please fill the form in on the computer, if this is not possible
please write clearly using block capitals, and return to:

Amanda Hancock, Early Years Childcare & SAFE 0 -12, 25a Laurel Gardens, Hanwell W7 3JG

If you require any assistance or have any questions please call:

Amanda Hancock on 020 8825 9330 or e-mail Amanda.hancock@ealing.gov.uk

