



2024/25 Application to:
Childcare Fund
Discretionary Fund for Childcare Support
Lone Parent's Childcare Grant

If you have more than one childcare provider, you must fill in a separate form for each of them. Please therefore make the relevant number of copies of this form.

Section A: Your Personal Details

Name:	Matriculation No.:
Email:	SAAS Reference number:
Course Studying:	Year of Study:

Section B: To be completed by the Student

Please give us details of the registered or formal childcare costs you expect to pay during the period 16 September 2024 to 30 May 2025. The childcare provider you use must be registered with Care Commission in Scotland and must provide their registration number in the box provided. We will not pay for informal childcare, for example, a friend or relative.

Please note that we regularly ask childcare providers to confirm that your child/children is/are registered with them. We will also regularly ask you to confirm childcare requirements before making subsequent payments. You must advise us immediately if you change childcare provider or of any change in your circumstances that may affect your entitlement to this grant. If we have paid you more than you are entitled to, we will ask you to pay this back. If you make a false claim, action may be taken to recover any award made to you, and you may not be permitted to matriculate or graduate until the award is recovered.

We cannot help you with childcare costs if you are getting them paid in full, from another source. We will take the payment you expect to receive from other sources from your childcare costs for the year. If you expect to receive a payment from your Local Authority for pre-school education, you should tell us how much you expect this to be, even if you are still waiting to claim this back from the Authority.

Approximate Childcare costs for the academic year: Please enter the total cost of registered or childcare that you expect to pay.	£
Approximate Childcare costs you expect to receive from other sources: Please enter the total childcare cost you expect to receive from other sources.	£
Total childcare costs: Please enter the total childcare costs for one childcare provider, less what you expect to receive from other sources.	£

Details of children - Children's full names	Date of birth
1)
2)
3)
4)
5)



Section C: To be completed by your Childcare Provider (Please complete all sections)

I confirm that I have agreed to provide Childcare to the named child/children detailed on the form and I will advise you immediately of any change to this. (Please note that it would be helpful if you could keep a record of when the above child/children are in your care and the cost of this care, as we may ask for this information sometime in the future).

Name, Address and Telephone Number of registered (or approved) Childcare Provider:

Name or Company

Name.....

Address.....

Tel: Email:

My Care Commission registration number is:

Manager or Proprietor's

Name:**Signature:****Date:**

STUDENT SERVICES

PLEASE NOTE:

We require confirmation of the weekly/monthly Childcare costs from your Childcare Provider.

If you have more than one Childcare Provider, the above information is required for each Provider.