

## Consent to validate funding Eligibility Code

I consent that the following information has been supplied to

Leaping frogs Day Nursery CIC to validate a funding eligibility code.

Leaping frogs Day Nurs	sery	CIC	, to v	alida	te a i	unai	ng ei	ligibii	ity co	oae.	
CODE											
My National Insurance N	Num	ber									
Child's Date of Birth						D	D	M	M	Y	Υ
Child's name								l	l		
My name											
My address											
understand that											
i) : , , , , , , , , , , , , , , , , , ,											

- i) receipt of 30/15 Hours eligibility will be checked by the local authority with the appropriate government departments (HMRC, DWP and Home Office);
- that any entitlement or change in entitlement status will be shared by the local authority with the setting(s) that the above-mentioned child attends;
- that data may be used to ensure accuracy of records across the local authority and to check against fraud;
- iv) the check may be subject to monitoring and recording only for purposes permitted by the Telecommunications (Lawful Business Practice) (Interception of Communications) Regulations 2000 in order to prevent or detect a crime, or investigate or detect the unauthorised use of the service.

Signed:	 	 
Dated:		