

**Free Early Education Entitlement (FEEE)**

# Application to become a registered FEEE provider

To be considered for entry into the Directory of Early Years Providers, all sections of this application form must be completed fully. There are 4 sections to the application:

* Section A – Setting information
* Section B – Owner(s)/Legal representatives
* Section C – Bank details
* Section D – Nominated user details

Once the application has been received and processed, a confirmation email will be sent along with a provider agreement, if you are eligible for FEEE funding. Funding will be awarded from the date the completed application is received. Please note no funding will be released until the provider agreement has been signed and returned. All providers should consider the information below prior to completing the attached application form:

Early years providers who wish to offer funded places for eligible 2-year-olds must be graded 'good' or' outstanding' by Ofsted. Newly registered providers can access this funding prior to receiving their Ofsted inspection but must be aware that if they do not achieve at least a 'good', they will not be in a position to offer 2-year-old funding to any further eligible children. Early years providers graded 'requires improvement' are expected to work with the local authority to improve the quality of their setting. If a provider receives an 'inadequate' judgement, funding will be withdrawn. If you require any assistance completing this form, please telephone 0116 305 5788.

Please ensure that you submit any additional information that is required. Guidance is given throughout the document to ensure that the correct procedures are followed.

Once completed, please email the form and attachments, to the FEEE inbox: [feee@leics.gov.uk](mailto:feee@leics.gov.uk).

Please note that it can take up to 6 weeks for the local authority to set new providers up, so please bear this in mind if a payment run is scheduled shortly.

Yours sincerely,

Early Learning and Childcare Inclusion Service

## Section A – Setting Information

This section will inform us of your organisational status and structure.

|  |  |
| --- | --- |
| Setting Name: |  |

|  |  |  |
| --- | --- | --- |
| Ofsted URN |  | |
| Is the setting registration active? If no proposed date |  | |
| Please tick grey box if exempt |  |  |

|  |  |
| --- | --- |
| Ofsted Registered Address, including Postcode: |  |
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|  |  |
| --- | --- |
| Main Contact Number: |  |
| Mobile Number: |  |
| Email Address: |  |

|  |  |
| --- | --- |
| Owner/Legal Representative: |  |

*Please note, the owner/legal representative is the person that is legally responsible for the setting. The registered legal entity should be a Director or Directors (Limited Company), Chair of Trustees (Registered Charity VMC or Company Limited by Guarantee), Chair of Governors (School), Chair of Committee (VMC) or Owner (Sole Trader).*

Please give details of the organisational structure (please tick one option):

|  |  |  |
| --- | --- | --- |
|  |  | Sole Trader |
|  |  | Partnership (Sole Traders) |
|  |  | Limited Liability Partnership (LLP) |
|  |  | Limited Company (Ltd.) |
|  |  | Public Limited Company (Plc.) |
|  |  | Co-operative (Coop) |
|  |  | Voluntary Management Committee (VMC\*) |

*\*A VMC is the group that has ultimate legal responsibility for a voluntary or community organisation’s activities.*

|  |  |  |  |
| --- | --- | --- | --- |
| Registered Charity  *(Please tick)* | No | Yes | If you answered ‘yes’, please state Charity Number below: |
|  |  |  |

A registered charity is an organisation that is registered with the Charities Commission and has a unique registered charity number. Committee members are known as Trustees.

Please give details of the Registered legal entity (please tick one option):

|  |  |  |
| --- | --- | --- |
|  |  | Owners/Directors |
|  |  | Committee/Trustees |
|  |  | The Governors |

The registered legal entity is an association, corporation, partnership, proprietorship, trust or individual that has legal standing in the eyes of the law. A legal entity has legal capacity to enter into agreements or contracts, assume obligations, incur and pay debts, sue and be sued in its own right and to be held responsible for its actions.

Please tick this box to confirm that this company is registered with HMRC:

## Section B - Owners/Legal Representatives

This section requires the personal details of the registered owner(s) or representative of the organisation as detailed in section A. At least one owner or representative must be given. This person will be responsible for signing the 'Provider Agreement', a legal document, on behalf of the registered company. The registered legal entity should be a Director or Directors (Limited Company), Chair of Trustees (Registered Charity VMC or Company Limited by Guarantee), Chair of Governors (School), Chair of Committee (VMC) or Owner (Sole Trader).

### Person 1

Name of the owner/Representative of the registered legal entity:

|  |  |  |
| --- | --- | --- |
| Title: | Forename: | Surname: |
| Date of Birth: | Job Title: | |

|  |  |
| --- | --- |
| Home Address, including Postcode: |  |
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|  |  |
| --- | --- |
| Main Contact Number: |  |
| Mobile Number: |  |
| Email Address: |  |

### Person 2

Name of the owner/Representative of the registered legal entity:

|  |  |  |
| --- | --- | --- |
| Title: | Forename: | Surname: |
| Date of Birth: | Job Title: | |

|  |  |
| --- | --- |
| Home Address, including Postcode: |  |
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| --- | --- |
| Main Contact Number: |  |
| Mobile Number: |  |
| Email Address: |  |

I/We declare that the above person(s) will be engaged as the new owner/representative of the stated childcare provision. I/We also confirm that this person(s) has been registered as a 'fit person' under the terms of the Children Act 1989, by Ofsted.

|  |  |
| --- | --- |
| Owner/Legal Representative’s Signature: |  |
| Owner/Legal Representative’s Printed Name: |  |
| Date: |  |

## Section C – Bank Details

|  |  |
| --- | --- |
| Name of Bank / Building Society: |  |
| Branch Address, including Postcode: |  |
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| --- | --- |
| Sort Code: |  |
| Account Number: |  |
| Account Name of Bank Account or Building Society: |  |

|  |  |
| --- | --- |
| Owner/Legal Representative’s Date of Birth (this is required so the local authority can carry out a security check): |  |

*Please note, for the local authority to set you up to receive payments, we require the following document to be attached to this form (failure to do this, will delay your future FEEE payments):*

***Bank Statement*** *- this should clearly state the account name, account number and sort code. This can be a screenshot from internet banking but must be readable and clear. The statement also needs to state the name and address of the setting, so that the local authority can confirm and evidence the details of the provider and that they are not fraudulent. (The evidence needs to show a date within the last 3 months.)* In order to process your banking information, the following points must be adhered to: The dedicated bank account must reference the name of the setting

*If you have a ‘Trading As’ bank account, we also require a letter headed document from the company/organisation, with the full trading name, address and bank details included.*

I/We declare that the banking information supplied is for use with the Early Years Inclusion and Childcare Service.

|  |  |
| --- | --- |
| Owner/Legal Representative’s Signature: |  |
| Owner/Legal Representative’s Printed Name: |  |
| Date: |  |

Joint Owner (if applicable)

|  |  |
| --- | --- |
| Owner/Legal Representative’s Signature: |  |
| Owner/Legal Representative’s Printed Name: |  |
| Date: |  |

## Section D – Nominated User Details

In order to submit your FEEE claims to the Local Authority you will need access to the Provider Portal. This section requires the contact details below of the staff that need access to the Provider Portal and who have responsibility for completing the headcount/adjustment tasks/2-year eligibility checks/verification of the 30-hour codes.

Childminders (and smaller settings) should provide at least 1 (but can optionally add another person (e.g. if you have an assistant)). For other providers, where providing email addresses we would recommend personal work email addresses*.* Where providing a personal email address, that these are not shared with other people (e.g. shared with other family members)

|  |  |
| --- | --- |
| Name of your Nominated Person (s): | Associated Email Address: |
| 1) |  |
| 2) |  |