



# Bushmead Primary & Nursery School

## Early Years Pupil Premium

### Registration Form

We need information about you and your child, so that we can provide them with the best education and support by making sure that we receive all the government funding to which we are entitled to help raise your child's attainment.

#### About your child:

Child's Last Name	Child's First Name	Child's Date of Birth	Name of School
			Bushmead Primary & Nursery School

#### Parent or Guardian Details:

	Parent/Guardian 1	Parent/Guardian 2
Last Name		
First Name		
Relationship to Child		
Date of Birth		
National Insurance Number		
National Asylum Support Service Number		
Daytime Telephone Number		
Mobile Telephone Number		
Address		
	Postcode:	Postcode:



**Family Income and Benefit Details:**

Is your joint family income over £16,190 per year? Please tick YES or NO	YES:	NO:
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If you have ticked YES, you do not need to complete the next section and can go straight to the declaration.

If you have ticked NO, please place a X in the boxes of the benefits that you are in receipt of:

Income Support	
Income-based jobseekers allowance	
Income-related employment and support allowance	
Support from NASS (National Asylum Support Service) under part 6 of the immigration and Asylum Act 1999	
The guarantee element of State Pension Credit	
Child Tax Credit (with no Working Tax Credit) with an annual income of no more than £16,190	
Working Tax Credit run-on	
Universal Credit	

If you are unsure whether your joint family income is over £16,190, or whether you are in receipt of one of the benefits listed above, we can still check whether your child is eligible for funding. Would you like us to do this for you? YES/NO - *please delete as appropriate*

**DECLARATION**

The information I have given on this form is complete and accurate. I understand that my personal information is held securely and will be used only for local authority purposes. I agree to the local authorities using this information to process my application for Early Years Pupil Premium. I also agree to notify the local authority in writing of any changes in my family's financial circumstances as set out in this form.

Signature of parent/guardian:

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Print Name:

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Date

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