Essex County Council

**Early Years and Childcare Out of School Inclusion Funding**

**For Holiday Club & Wrap Around Funding Applications**

Use this form to apply for funding for holiday club and wrap around care funding for children who are attending school and have a SEND need.

**2025/26 Academic Year**

Version 1

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| **Confirmation of informed notification to parent/carer that identifying information will be shared**All documents relating to your application for Out of School Inclusion Funding will be read by a panel of ECC Officers and parent representatives. All the panel members have signed a declaration stating that they will not disclose or store any information submitted for the purposes of applying for Out of School Inclusion Funding.You must explain this to the child’s parent(s)/carer(s) and provide them with the information below relating to ECC’s legal basis under The UK General Data Protection Regulations 2018 (GDPR)ECC’s lawful basis for processing the data as part of the funding application process are public task and legal obligation. The statutory duty is set out in the [Special educational needs and disability code of practice.](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf) For more information on how ECC process data please see our privacy notice - https://www.essex.gov.uk/privacy-education.**I confirm that the parent has been informed the details in this form will be shared with ECC in line with the above Yes or No**Applications without confirmation cannot proceed and will be returned to you. It is your responsibility to ensure that the parent(s)/carer(s) have been informed that the details included on the form will be shared with ECC. You may be asked to provide evidence of this if required. |

**The duration of funding will be noted on the funding agreement issued. Please read carefully.**

You must complete all the sections of this form in full. The Resource Panel will not read extra information or supporting evidence if it isn’t.

Send your application documents (application form and One Plan or EHCP) via secure email to EY.ResourcePanel@essex.gov.uk

Request a secure email link if you do not have one already.

We must receive your application by the first of each month. The Resource Panel usually meet on the third Thursday of each month. We aim to inform you of the outcome of your application within 10 working days of the meeting.

You can find further information about the Resource Panel and the application process on the out of school [Inclusion page](https://eycp.essex.gov.uk/funding/inclusion-funding/) of the Early Years and Childcare website.

If you need help to fill in this form email EY.ResourcePanel@essex.gov.uk

**Section 1**

**About your setting**

|  |  |
| --- | --- |
| Name of Provision |  |
| Address of Provision |  |
| Telephone |  |
| Name of person who will sign funding agreement |  |
| Email address for above |  This must be a business email. We cannot send documents to a personal email address |
| Ofsted URN (only Ofsted or school registered out of school childcare providers may apply for funding) |  |

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| **Legal Status**You must select the relevant box and provide a registration number where applicable.We cannot issue a Funding Agreement without these details.If you are a Limited or Community Interest Companies and you have a different name and/or a registered address on the [Companies House website](https://beta.companieshouse.gov.uk/), you must also provide these details below.  |
| **[ ]  Limited Company/CIC** – Companies House Reg Number      Organisation NameAs it appears on legal documents     Registered AddressIf you are a limited company with a registered office address      [ ]  **Charity** – Charity Commission Reg Number       [ ]  **School** – DfE registration number      [ ]  **Sole Trader** [ ]  **Partnership**  |

**Section 2**

**Child’s details**

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| Name  |
| Date of Birth |
| Postcode |
| Date child due / started attending       |
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**Section 3**

**The child must meet one of the following criteria, please tick all that apply**

[ ]  EHCP funding level band 4 or more

[ ]  One plan that meets the medium or high school banding descriptors

**Please complete the box below with the hours the child intends to attend. We will ask you to confirm before each period the actual planned hours of attendance.**

**Note that you cannot claim more than 10 hours per day**

**Number of weeks are auto filled but can be reduced if necessary**

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| --- | --- | --- | --- |
| **Term Period**  | **Total hours for the period**  | **Number of weeks** | **Usual Number of Hours per week** |
| ***AUTUMN TERM 1*** (01/09/25 – 24/10/25) |   | 8 |   |
| AUTUMN HALF TERM (27/10/25 – 31/10/25) |   | 1 |   |
| ***AUTUMN TERM 2*** (03/11/25 – 19/12/25) |   | 7 |   |
| WINTER HOLIDAY (22/12/25 – 02/01/26) |   | 1 |   |
| ***SPRING TERM 1*** (05/01/26 – 13/02/26) |   | 6 |   |
| SPRING HALF TERM (16/02/26 – 20/02/26) |   | 1 |   |
| ***SPRING TERM 2*** (23/02/26 – 27/03/26) |   | 5 |   |
| EASTER HOLIDAYS (30/03/26 – 10/04/26) |   | 2 |   |
| ***SUMMER TERM 1*** (13/04/26 – 22/05/26) |   | 6 |   |
| SUMMER HALF TERM (25/05/26 – 29/05/26) |   | 1 |   |
| ***SUMMER TERM 2*** (01/06/26 – 20/07/26) |   | 7 |   |
| SUMMER HOLIDAYS (21/07/26 – 31/08/26) |   | 6 |   |
| **TOTAL** |   |   |   |

**Section 4**

**Current needs & impact of any previous funding**

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| **How does/do you think the child will present in your environment? Tell us what this may look like, including how you will meet any additional needs or medical interventions.**Click or tap here to enter text. |

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| **Please provide details of how your provision will link in to targets in the one plan through the activities you provide.**Click or tap here to enter text. |

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| **What additional interventions and reasonable adjustments have you made or will be implemented within your daily routine or external outings to support the child to enjoy their time at the holiday club (including enhanced ratios through additional staff)?** Click or tap here to enter text. |

**Section 5**

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| **Please provide a brief overview of conversations with parents and school.**Click or tap here to enter text. |

**Section 6**

**Submitting your application**

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| **Name of person submitting application:**       |
| **Role:**       |
| **Email:**  |
| **Phone:**  |
| **Date:**       |
| **Please confirm that you have authority to submit this application on behalf of the provider**Yes or No **Please confirm that you understand that funding may be subject to undergoing a monitoring visit when required.**Yes or No  |
| **You are required to submit a copy of the child’s One Plan/SEND Support plan/EHCP and a Health Care Plan if one is in place.** (please note a One Page Profile is NOT acceptable)**Please tick the box to confirm plan(s) attached:**[ ]  |

The deadline for receiving applications is the first of each month. Applications received by then will be considered at the meeting that month. Panel meeting dates can be found on our [website](https://eycp.essex.gov.uk/funding/inclusion-funding/). If you need help to fill in this form email EY.ResourcePanel@essex.gov.uk

Please make sure that you allow enough time and complete your application fully:

1. We will not consider incomplete applications.
2. We will not consider late applications until the following Resource Panel.
3. It is the applicant’s responsibility to ensure that the application documents are submitted
4. Once your application is fully complete, please send it by email to EY.ResourcePanel@essex.gov.uk
5. You will receive an automated email. This is NOT proof of submission. We will respond within 5 working days to accept your application. If the application requires further completion, we will email you to reject the application, noting the amendments required.
6. You will receive written notice of the outcome of your application within ten working days of the Resource Panel meeting. Early Years and Childcare staff will be unable to inform you of the outcome of your application through any other means.

**Data Protection**

Essex County Council will process personal information included in this document in accordance with the UK GDPR 2018. The Council will not disclose such information to any unauthorised person or body and will only use such information for the purposes of administering your application. The information will be retained only for as long as necessary to do so and will then be securely destroyed. The Council may also use this data in connection with the prevention or detection of fraud or other crime. For more information on how ECC process data please see our privacy notice - <https://www.essex.gov.uk/privacy-education>.

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