

Private, Voluntary and Independent Provider  
Application for Inclusion in Wigan Council's  
Directory of Early Years Providers



**Provider/Setting/Childminder Details**

<b>Provider Name:</b>			
<b>Provider Address:</b>			
	<b>Postcode:</b>		
<b>Contact Names:</b>	<b>Owner</b>	<b>Manager</b>	
<b>Telephone number:</b>	<b>Mobile:</b>		
<b>Email address:</b>			
<b>Type of Provider:</b> (please tick ONE box)	<input type="checkbox"/> Private <input type="checkbox"/> Voluntary <input type="checkbox"/> Independent <input type="checkbox"/> Childminder		
<b>Type of Organisation:</b> (please tick ONE box)	<input type="checkbox"/> Sole owner <input type="checkbox"/> Partnership (of 2 or more persons) <input type="checkbox"/> Registered Charity <input type="checkbox"/> Committee <input type="checkbox"/> Company (Registered with Companies House) <input type="checkbox"/> Other please provide details .....		

**Ofsted Registration**

<b>Ofsted Reg No.</b> Please attach copy certificate		<b>Ofsted Judgement &amp; Date</b>	/ /
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**Funding Arrangements**

Providers may claim funding for eligible 2,3 and 4 year old children provided with an early education place. All funding is paid by BACS to the provider's business account. Please provide your details below and attach Supporting evidence e.g. Bank statement, Paying in slip, Cheque :-

<b>Please indicate the age group that you are eligible to provide a funded place for:</b>	<b>2 year old</b> Yes/No	<b>3 and 4 year old</b> Yes/No	<b>30 hours</b> Yes/No
<b>Bank account status:</b> Please tick ONE box	<input type="checkbox"/> I confirm that I have a dual signatory business bank account <input type="checkbox"/> I confirm that I am a sole trader and have a business bank account		
<b>Bank Name:</b>			
<b>Name on Account:</b>			
<b>Bank Sort Code:</b>		<b>Bank Account Number:</b>	

**Application Consent**

**ALL** Partners, Directors or Committee Members of the organisation's managing body must consent to this application for inclusion in the Directory of Early Years Providers to provide free Early Years places and claim funding.  
ALL relevant persons must complete the section below to indicate consent.

Signature	Full Name	Date	Position in Organisation

## Declaration – TO BE SIGNED BY NOMINATED PERSON ON BEHALF OF ORGANISATION

<b>Signing the declaration below means that you agree to the terms and conditions listed opposite on behalf of the organisation.</b>	<ul style="list-style-type: none"> <li>I confirm that I have been nominated by the persons listed above to apply on behalf of the organisation for inclusion in Wigan Council's Directory of Early Years Providers.</li> <li>I confirm that I have read Wigan's Early Years Provision Grant Funding Contract and agree to comply with its requirements.</li> <li>I understand that inclusion in the Directory of Early Years Providers is subject to my compliance with a contract and that if I breach the terms of this contract Wigan Council may remove me from the Directory.</li> <li>I understand that Wigan Council may need to share information about me with other statutory agencies for data collection, promotion/marketing and planning purposes. This may include other Departments of Wigan Council and The Department for Education (DfE). I give permission for Wigan Council to share any information they hold about me with other organisations that deal with Early Years Provision and/or public funds to prevent and detect fraud.</li> <li>I confirm that the information provided above is true and correct.</li> </ul>
<b>Signed:</b>	<b>Date:</b>
Applicant (or nominated person on behalf of organisation)	
<b>Name: (in CAPS)</b>	
<b>Position in organisation:</b>	

## Portal Users

Please provide details below for all users requiring access to the Portal (e.g. completion of headcount tasks). We recommend minimum 2 Staff to ensure cover in case of absence.

Full Name	Email Address <small>(unique to user and preferably include users name)</small>	Date of Birth

**Please return the completed Application Form to:**

Early Years Finance Team  
 Finance Division  
 Town Hall  
 Library Street  
 Wigan  
 WN1 1YN

E-mail – [WEYDFunds@wigan.gov.uk](mailto:WEYDFunds@wigan.gov.uk)

If you require advice or assistance, please contact the Early Years Finance Team on 01942 827865/827785

## FINANCE USE ONLY

Set up on relevant Spreadsheets		Set up on One	
Set up on Agresso		Link on Portal (issue claim timetable/parental contracts)	
Request base and Portal user on Supportworks		Send new user email details to all Portal users	
Update A Holland if Childminder or Out of School Club			