



Steps to getting a Childcare Grant (CCG) if you have dependent children in registered or approved childcare.

Step 1

You need to complete and return an Application for help with childcare costs form (CCG1).

Step '

You **must** use a registered or approved childcare provider. You can find out more about this in our online guidance which can be found at **www.studentfinanceni.co.uk**

If you haven't found a childcare provider yet, complete and return the form leaving section 3 blank. We'll ask you to give us the childcare provider's details at a later date.

You can't receive Childcare Grant at the same time as the childcare element of Working Tax Credit, Tax-free Childcare from HM Revenue and Customs (HMRC) or Childcare Allowance from the National Health Service (NHS). Only complete this form if you are receiving no other childcare support. You can get information on all aspects of Working Tax Credit online at www.gov.uk

Step 2

We will assess your application to determine if you qualify for a Childcare Grant.

Step 2

Your application will be income assessed, based on details provided on your 'Application for Student Finance' Form. Your **estimated** costs will be used to work out your Childcare Grant payments until you provide details of the actual payments. You should **not** claim a Childcare Grant for any free place from the Department of Education for three and four year olds.



Step 3

You will receive a letter advising of any Childcare Grant awarded.

Step 3

Once we have assessed your estimates and your eligibility we will send you a letter confirming how much Childcare Grant you are entitled to. This letter also details any other student finance you may be entitled to.



Step 4

We will pay the 1st instalment of your grant direct to you.

Step 4

Your first instalment of Childcare Grant will be paid into your bank or building society account. This may be on the same day as any other student finance payments, provided you have submitted all relevant information on time.



Step 5

You need to complete and return the first of the 'Confirmation of Childcare payments' forms, (CCG2).

Step 5

At the end of your 1st period we will send you a Confirmation of Childcare payments form (CCG2) to complete. This will let you and your childcare provider confirm what your **actual** costs were for the 1st period.



Step 6

We will reassess, if necessary, your Childcare Grant entitlement.

Step 6

Based on your **actual** costs we will reassess your entitlement and, if you have been overpaid or underpaid, will adjust your entitlement accordingly.



Step 7

Steps 5 and 6 are repeated in the 2nd and 3rd periods.

Step 7

At the end of both periods 2 and 3 we will ask you to complete a Confirmation of Childcare payments form (CCG2) again as you did in period 1. This will help us ensure you have been paid the correct amount of Childcare Grant.



It is an offence to knowingly provide false information on this form.

Instructions

- Sections 1 and 2 must be completed by you.
- Section 3 must be completed by your childcare provider(s).
- Answer all the questions. If you leave any questions blank we will not be able to process
 this application. If a question does not apply to you, please enter 'None' or 'N/A' as the
 answer.
- If you want to provide further information for any section, please attach a blank piece of paper to the back of this form.
- You must send your 2016/17 Child Tax Credit Award Notice (TC602) with this form.

section

1

student's details

Customer Reference Number	
Forename(s)	
Surname	
Date of birth	DAY MONTH YEAR
Your full current home address	s (not your university or college address)

section

2

student's childcare details

Childcare details

Please provide details of children who will be receiving registered or approved childcare during your academic year. You should only include childcare provided from the first day of your 2016/17 academic year.

Child's full name	Date of birth	Date childcare started in academic year 2016/17
Child 1	DAY MONTH YEAR	DAY MONTH YEAR
Child 2	DAY MONTH YEAR	DAY MONTH YEAR
Child 3	DAY MONTH YEAR	DAY MONTH YEAR
Child 4	DAY MONTH YEAR	DAY MONTH YEAR
Child 5	DAY MONTH YEAR	DAY MONTH YEAR



student's childcare details

	nentionea in qu	estion 2a recei	ve a free place	e from the Depa	artment
•	•		•	mic year 2016/	
f 'Yes', please	give the name	and address of	f the provider(s) below.	
· •			•	,	
			D	1.	
			Post	code	
Childcare esti	mates				
Tell us each ch	ild's name and	how much you	r weekly child	care costs will I	be for the full
	including holid	•	,		
adddinio y car,	illolading hollo	idyo.			
The earliest we	can nav for vo	our childcare co	sts is the start	of your acade	mic vear If you
				cademic year a	•
	-			dueillic year a	IIU IIIE Start or
i piease compi	ete weekiy cos	ts 'Before term	Т.		
	You must c	omplete the ta	hle helow wit	th weekly cost	•
N of abild				th weekly cost	
Name of child		Omplete the ta	Child 3	Child 4	Child 5
Name of child Before term 1					
	Child 1	Child 2	Child 3	Child 4	Child 5
Before term 1	Child 1	Child 2	Child 3	Child 4	Child 5
Before term 1 Term 1	Child 1 £	Child 2 £	Child 3 £	Child 4	Child 5
Before term 1 Term 1 Holiday 1	£ £ £	Child 2 £ £	£ £ £	£ £ £	£ £ £
Before term 1 Term 1 Holiday 1 Term 2	£ £ £	£ £ £	£ £ £	£ £ £	£ £ £
Before term 1 Term 1 Holiday 1 Term 2 Holiday 2 Term 3	£ £ £ £ £ £ re in the final	£ £ £ £ year of your of	£ £ £ £ £ £ £ £ £ £ £ £ £ £ £ £ £ £ £	£ £ £ £ n only pay the	£ £ £ £ £
Before term 1 Term 1 Holiday 1 Term 2 Holiday 2 Term 3	£ £ £ £ £ £ re in the final	E E E E E	£ £ £ £ £ £ £ £ £ £ £ £ £ £ £ £ £ £ £	£ £ £ £ n only pay the	£ £ £ £ £

NI/CCG1/1617

It is recommended that you take a note of the estimates provided as this information may be

helpful when you complete your actual costs later in the year on the form CCG2.



student's childcare details

Exceptions to childcare estimates

If you do not pay for childcare for a whole term or holiday period, or if your childcare costs are different in any week to those you have given in question 2c, please provide details below.

Name of child	Weeks in which you do r which you pay dif	Total weekly childcare costs (£)	
	From (DD/MM/YYYY)	To (DD/MM/YYYY)	

Student Declaration

Our Data Protection Statement sets out who will use the information provided on this form and what they will use it for. Before signing this form please read our statement online at www.studentfinanceni.co.uk/dataprotection

Alternatively, you can request a copy by writing to the Student Loans Company (SLC) at 100 Bothwell Street, Glasgow, G2 7JD or by calling our Customer Support Office on 0300 100 0077.

- I confirm that to the best of my knowledge and belief, the information I have provided is true and complete. If it is not, I understand I may be refused financial support, and any support I have had may be withdrawn and I could be prosecuted.
- I confirm that neither I nor my husband, wife, civil partner or cohabiting partner have chosen to receive support for childcare from the childcare element of:

 (i) the Working Tax Credit;
 (ii) Tax-Free Childcare; and/or (iii) the NHS Childcare Allowance; and I agree to tell SLC immediately if I or my husband, wife, civil partner or cohabiting partner does receive this support. I understand that SLC reserves the right to share my personal data with HMRC to check whether I am in receipt of childcare support from HMRC.

Your full name (in BLOCK CAPITALS)			
Your signature	X	Today's DAY MONTH Codate	YEAR

•

Important information

Your childcare provider(s) completes section 3 of this form; you must ensure that each childcare provider is approved or registered as described in our online guidance. This can be found at **www.studentfinanceni.co.uk**

You cannot receive a Childcare Grant if you or your husband, wife or partner are receiving the childcare element of Working Tax Credit, Tax-free childcare from HMRC or Childcare Allowance from the NHS

You need to send us all the evidence we need, including your child's/children's original long birth certificate(s), and any evidence that you have care of the child/children, for example, your Child Tax Credit Award Notice (TC602).

to be completed by childcare provider (1)

Name of childcare provider	
Address	
	Postcode
Phone number	
Childcare provider registration/appro	val details
Please tick the appropriate box and pro	
Registered childcare provider in	Northern Ireland
	Social Services Trust as a childminder or provider of
Registration number (if applicable)	DAY MONTH YEAR
Date of registration	
Please sign the childcare provider	declaration on the next page.
Approved or registered childcard	e provider in England, Scotland or Wales
Registration number	
Date of approval or registration	This lasts from
	To DAY MONTH YEAR
Name and address of the organisa registered with.	ation which granted approval or that you are
	Postcode
Phone number	
Please sign the childcare provider	



to be completed by childcare provider (1)

Childcare provider declaration I agree to provide childcare as shown in section 2 of this form and that this childcare has been approved by or registered with the organisation that I have indicated.			
Your full name (in BLOCK CAPITALS) Your signature	X	Today's DAY MONTH date	YEAR
It is an offe	nce to knowingly prov	ide false information on	this form.

to be completed by childcare provider (2)

Addı	ress
	Destands
	Postcode
Pho	ne number
Chil	dcare provider registration/approval details
Plea	se tick the appropriate box and provide the details requested.
	Registered childcare provider in Northern Ireland I am registered with a Health and Social Services Trust as a childminder or provider of daycare.
	Registration number (if applicable)
	Date of registration
	Please sign the childcare provider declaration on the next page.
	Approved or registered childcare provider in England, Scotland or Wales Registration number
	Date of approval or registration This lasts from DAY MONTH YEAR DAY MONTH YEAR DAY MONTH YEAR
	To Name and address of the organisation which granted approval or that you are registered with.
	Postcode
	Phone number



to be completed by childcare provider (2)

Childcare provider declaration I agree to provide childcare as shown in section 2 of this form and that this childcare has been approved by or registered with the organisation that I have indicated.					
Your full name (in BLOCK CAPITALS) Your signature	X		Today's DAY date	MONTH YEAR	
It is an offer	ence to knowing	Jly provide f	alse informat	ion on this	s form.

Additional notes If you are providing extra information below please clearly mark what section and question the information is about.

Student's checklist Before returning this form, please make sure that you have done the following	j :
Fully answered all the relevant questions Checked that your childcare provider is fully registered or approved. For more information read our online guidance available at www.studentfinanceni.co.uk	tick
Asked your childcare provider(s) to complete section 3 (if applicable)	tick
Attached all the evidence we need, including your child's/children's original long birth certificate(s), and any evidence that you have care of the child/children, for example, your 2016/17 Child Tax Credit Award Notice (TC602)	tick L
Signed and dated the Student's Declaration	tick
Please remember to pay the correct postage.	
You must return your completed form to the Education Authority (EA) address can be found using the EA finder available online at www.studentfinanceni.co	