

Consent to validate HMRC Eligibility Code

I consent that the following information has been supplied to

Name of Childcare Provider: to validate

an eligibility code.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| CODE |  |  |  |  |  |  |  |  |  |  |  |
| My National Insurance Number | | |  |  |  |  |  |  |  |  |  |
| Child’s Date of Birth (DD/MM/YY) | | | | | |  |  |  |  |  |  |
| Child’s name | | | | | | | | | | | |
| My name | | | | | | | | | | | |
| My address | | | | | | | | | | | |

I understand that

1. On receipt of code your eligibility will be checked by the local authority with the appropriate government departments (HMRC, DWP and Home Office);
2. that any entitlement or change in entitlement status will be shared by the local authority with the setting(s) that the above-mentioned child attends;
3. that data may be used to ensure accuracy of records across the local authority and to check against fraud;
4. the check may be subject to monitoring and recording only for purposes permitted by the Telecommunications (Lawful Business Practice) (Interception of Communications) Regulations 2000 in order to prevent or detect a crime, or investigate or detect the unauthorised use of the service.

Signed:……………………………………………………………….

Dated:………………………………..

This document is to be retained by the Childcare Provider and NOT returned to Wiltshire Council.