

# CHILDCARE EXPENSE CLAIM

**Student Name**  **Student Ref** (per student card)

**Course**

**Child's Name**  **Week Claiming**  **Week Ending**  **Friday**   
**Childcare for** / /

	Hour(s)	Total Cost		Amount Payable By Local Authority	=	Amount Payable By College
<b>Monday</b>	<input type="text"/>	£ <input type="text"/>	—	£ <input type="text"/>	=	£ <input type="text"/>
<b>Tuesday</b>	<input type="text"/>	£ <input type="text"/>	—	£ <input type="text"/>	=	£ <input type="text"/>
<b>Wednesday</b>	<input type="text"/>	£ <input type="text"/>	—	£ <input type="text"/>	=	£ <input type="text"/>
<b>Thursday</b>	<input type="text"/>	£ <input type="text"/>	—	£ <input type="text"/>	=	£ <input type="text"/>
<b>Friday</b>	<input type="text"/>	£ <input type="text"/>	—	£ <input type="text"/>	=	£ <input type="text"/>
<b>Total(s)</b>	<input type="text"/>	£ <input type="text"/>	—	£ <input type="text"/>	=	£ <input type="text"/>

I declare that the above costs are for childcare provided for attendance on my course of study, timetabled study periods, designated unpaid placement and reasonable travel time to and from these activities only. I understand that the college may claim funds from me for payments made where I breach the Terms and Conditions of the Childcare Fund Award offered to me.

**Student Signature**  **Date**

I confirm that the above costs are correct and in accordance with the above.

**Childcare Providers**  **Date**   
**Signature**

Name and address of childcare provider  **Reg No.**

**CLAIMS MUST BE RECEIVED PER THE SCHEDULE ON THE REVERSE PAGE TO GUARANTEE PAYMENT.  
LATE CLAIMS MAY BE HELD UNTIL THE FOLLOWING SCHEDULED PAYMENT DATE.  
PAYMENT MAY NOT BE MADE IF A CLAIM IS INCOMPLETE.**

**HNC, HND AND DEGREE STUDENTS ELIGIBLE FOR THE SAAS LONE PARENT CHILDCARE GRANT WILL HAVE THE WEEKLY CLAIM REDUCED BY THE PROPORTIONATE AMOUNT.**

**PLEASE ENSURE BOTH THE STUDENT'S SIGNATURE AND THE CHILDCARE PROVIDER'S SIGNATURE ARE ON EACH CLAIM SUBMITTED.**

**ONLY CHILDCARE EXPENSE CLAIM FORMS SUBMITTED BY 24 JUNE 2011 WILL BE PAID.**

**For Office Use**

Award Payable  Yes / No  Date Payable  / /  Initials

Appeal Payable  Yes / No  Date Payable  / /  Initials

## Payment Dates

Week Ending Friday:	Submission Date to Guarantee Payment on the Due Date is Monday:	Payment Date, Friday:
27-Aug-10	30-Aug-10	01-Oct-10
03-Sep-10	06-Sep-10	01-Oct-10
10-Sep-10	13-Sep-10	01-Oct-10
17-Sep-10	20-Sep-10	01-Oct-10
24-Sep-10	27-Sep-10	29-Oct-10
01-Oct-10	04-Oct-10	29-Oct-10
08-Oct-10	11-Oct-10	29-Oct-10
15-Oct-10	Holiday Week – not payable	Holiday Week – not payable
22-Oct-10	25-Oct-10	26-Nov-10
29-Oct-10	01-Nov-10	26-Nov-10
05-Nov-10	08-Nov-10	26-Nov-10
12-Nov-10	15-Nov-10	26-Nov-10
19-Nov-10	22-Nov-10	24-Dec-10
26-Nov-10	29-Nov-10	24-Dec-10
03-Dec-10	06-Dec-10	24-Dec-10
10-Dec-10	13-Dec-10	24-Dec-10
17-Dec-10	20-Dec-10	21-Jan-11
24-Dec-10	10-Jan-11	21-Jan-11
31-Dec-11	Holiday Week – not payable	Holiday Week – not payable
07-Jan-11	Holiday Week – not payable	Holiday Week – not payable
14-Jan-11	17-Jan-11	18-Feb-11
21-Jan-11	24-Jan-11	18-Feb-11
28-Jan-11	31-Jan-11	18-Feb-11
04-Feb-11	07-Feb-11	18-Feb-11
11-Feb-11	14-Feb-11	18-Mar-11
18-Feb-11	21-Feb-11	18-Mar-11
25-Feb-11	28-Feb-11	18-Mar-11
04-Mar-11	07-Mar-11	18-Mar-11
11-Mar-11	14-Mar-11	15-Apr-11
18-Mar-11	21-Mar-11	15-Apr-11
25-Mar-11	28-Mar-11	15-Apr-11
01-Apr-11	04-Apr-11	15-Apr-11
08-Apr-11	Holiday Week – not payable	Holiday Week – not payable
15-Apr-11	Holiday Week – not payable	Holiday Week – not payable
22-Apr-11	25-Apr-11	13-May-11
29-Apr-11	02-May-11	13-May-11
06-May-11	09-May-11	10-Jun-11
13-May-11	16-May-11	10-Jun-11
20-May-11	23-May-11	10-Jun-11
27-May-11	30-May-11	10-Jun-11
03-Jun-11	06-Jun-11	24-Jun-11
10-Jun-11	13-Jun-11	24-Jun-11
(NQ Dance only) 17-Jun-11	20-Jun-11	01-Jul-11

Please send this claim to:

**Student Finance Section  
Moray College  
Moray Street  
ELGIN IV30 1JJ**