

## RS7 Early Childhood Funding Return

### Management Contact Details

This is the address for all funding forms.

Tel:  
Fax:  
Email:

If the Management Contact and / or Service Details are incorrect please contact your Ministry of Education Regional Office to complete an *EC8 Application to Amend a Licensed Early Childhood Service's Details* form.

### Instructions

You can refer to Chapter 9 of the Early Childhood Funding Handbook for instructions on filling out this form.

You must use pen to complete this form.

A copy of this form **must** be retained in the service for audit purposes.

**You must complete and post the original form to be received no later than** to:

ECE Operational Funding, Ministry of Education at: 33 Bowen Street, Wellington Central, Wellington 6011 or PO Box 1666, Wellington 6140.

If you have any queries, you can call the Resourcing Contact Centre on 0800 ECE ECE (0800 323 323) or e-mail: [resourcing@education.govt.nz](mailto:resourcing@education.govt.nz).

**Note: Forms received later than the due date may result in delayed funding.**

### Service Details

**If this information is not correct contact your Ministry of Education Regional Office urgently [Refer to Early Childhood Handbook for contact details].**

Service Name:

Service Address:

Tel:

Fax:

Email:

#### Service Funding Information

Organisation Name:

Type of EC Service:

Provision Type:

Regional Office:

Licence Class:

#### Equity Funding Information

Low Socio-economic:

Special Needs:

Language: N/A

Isolation: N/A

#### Bank Account Number

Funds for this will be deposited to the following account. If this is **NOT** correct, **please complete an RS2** (Change of Bank Account).

Bank and Branch

Account

Suffix

| Service No.                |  |         |          |                                 |  |              |         |                              |    |  |  |
|----------------------------|--|---------|----------|---------------------------------|--|--------------|---------|------------------------------|----|--|--|
| Subsidy Funded Child Hours |  |         |          | 20 Hours ECE Funded Child Hours |  |              |         | Staff Hour Count             |    |  |  |
|                            |  | Under 2 | 2 & Over |                                 |  | 20 Hours ECE | Plus 10 | ECE Qualified & Certificated |    |  |  |
|                            |  |         |          |                                 |  |              |         | Yes                          | No |  |  |
| Total                      |  |         |          | Total                           |  |              |         | Total                        |    |  |  |

**Instructions for Completing Staff Hour Count and Funded Child Hours**

- For ECE funding purposes, Certificated teachers are teachers who are either ECE qualified or Primary qualified, and holders of current practising certificates.
- 20 Hours ECE and Plus 10 Funded Child Hours can only be claimed on the days that your service operates as Teacher Led. Refer to the table below for the days your service may claim 20 Hours ECE and Plus 10 Funded Child Hours.

**Complete Staff Hour Count (SHC) and 20 Hours ECE FCH based on the following operating days:**

| Day       | Provision Type | Session Type | SHC Required | 20 Hours ECE FCH |
|-----------|----------------|--------------|--------------|------------------|
| Monday    |                |              |              |                  |
| Tuesday   |                |              |              |                  |
| Wednesday |                |              |              |                  |
| Thursday  |                |              |              |                  |
| Friday    |                |              |              |                  |
| Saturday  |                |              |              |                  |
| Sunday    |                |              |              |                  |

| Service No.                |  |         |          |                                 |  |              |         |                              |  |     |    |
|----------------------------|--|---------|----------|---------------------------------|--|--------------|---------|------------------------------|--|-----|----|
| Subsidy Funded Child Hours |  |         |          | 20 Hours ECE Funded Child Hours |  |              |         | Staff Hour Count             |  |     |    |
|                            |  | Under 2 | 2 & Over |                                 |  | 20 Hours ECE | Plus 10 | ECE Qualified & Certificated |  |     |    |
|                            |  |         |          |                                 |  |              |         |                              |  | Yes | No |
| Total                      |  |         |          | Total                           |  |              |         | Total                        |  |     |    |

| <b>For Info Only:</b> Indicate the reason for any one-off closures using the following abbreviations: |   |
|---|---|
| <b>AD</b>   | Anniversary Day   |
| <b>EC</b>   | Emergency Closure. Copy of Regional Office confirmation letter to be attached |
| <b>HP</b>   | Holiday Period  |
| <b>NF</b>   | Not Funded  |
| <b>NPRR</b>   | Not Meeting Person Responsible Requirement                                    |
| <b>SC</b>   | Service Closed  |
| <b>SD</b>   | Substitute/Extra Day  |
| <b>SH</b>   | Statutory Holiday   |
| <b>SO</b>   | Service Open – holiday period with no attendances                             |
| <b>TOD</b>  | Teacher Only Day  |
| <b>UNI</b>  | University Holiday  |

| Subsidy Funded Child Hours |  | 20 Hours ECE Funded Child Hours |          |       |  | Staff Hour Count |         |                              |    |
|----------------------------|--|---------------------------------|----------|-------|--|------------------|---------|------------------------------|----|
|                            |  | Under 2                         | 2 & Over |       |  | 20 Hours ECE     | Plus 10 | ECE Qualified & Certificated |    |
|                            |  |                                 |          |       |  |                  |         | Yes                          | No |
|                            |  |                                 |          |       |  |                  |         |                              |    |
| Total                      |  |                                 |          | Total |  |                  |         | Total                        |    |

| Subsidy Funded Child Hours |  | 20 Hours ECE Funded Child Hours |          |       |  | Staff Hour Count |         |                              |    |
|----------------------------|--|---------------------------------|----------|-------|--|------------------|---------|------------------------------|----|
|                            |  | Under 2                         | 2 & Over |       |  | 20 Hours ECE     | Plus 10 | ECE Qualified & Certificated |    |
|                            |  |                                 |          |       |  |                  |         | Yes                          | No |
|                            |  |                                 |          |       |  |                  |         |                              |    |
| Total                      |  |                                 |          | Total |  |                  |         | Total                        |    |

| Advance Days  |                |                  |                                 | Service No.    |                  |
|---|----------------|------------------|---------------------------------|----------------|------------------|
| Number of funded days the service will operate during a month |                |                  | Maximum number of days possible |                |                  |
|   | 'All Day' days | 'Sessional' days |                                 | 'All Day' days | 'Sessional' days |
|   |                |                  |                                 |                |                  |
|   |                |                  |                                 |                |                  |
|   |                |                  |                                 |                |                  |
|   |                |                  |                                 |                |                  |

### Attestation of Certificated Teachers' Salaries

Services that want to access funding rates which reflect the proportion of certificated teachers used must pay all employed ECE and primary qualified certificated teachers at least the amount specified at Step 1, as defined in the ECE Funding Handbook available on the Education.govt.nz website.

Is your service paying all employed ECE and primary qualified certificated teachers at least the amount specified at Step 1, as defined in the ECE Funding Handbook?

By answering 'Yes' to this question, your service is identified as meeting this funding condition. Your service will therefore have access to funding rates that reflect the proportion of certificated teachers used.

By answering 'No' to this question, your service is identified as having not met this funding condition. Your service will, therefore, be paid at the lowest level of funding.

(tick one only)  Yes  No

Services that want to access parity funding rates must agree to pay all employed ECE and primary qualified certificated teachers according to the full salary scale defined in the ECE Funding Handbook available on the Education.govt.nz website.

If you selected yes to the above, is your service paying all ECE and primary qualified certificated teachers working at your service according to the full salary scale defined in the ECE Funding Handbook?

By answering 'Yes' to this question your service is identified as meeting this funding condition. Your service will have access to parity funding rates.

By answering 'No' to this question your service is identified as not meeting this funding condition. Your service will have access to base funding rates.

(tick one only)  Yes  No

## Declaration

I certify that, to the best of my knowledge, the information contained on this form is true and correct.

### I understand that:

- if I have made a false statement **or**
- if I have failed to answer all questions in full **or**
- if I do not provide documentation supporting the funding claim **or**
- if I do not make documents available for inspection **or**
- if I do not tell the Ministry of Education of changes that may affect funding claims or rates

### then

- The funding claim may be reviewed and funding withheld **and / or**
- I will have to pay back the total amount of any overpayment **and / or**
- I may be prosecuted and fined or imprisoned.

By signing this declaration, I am confirming that this funding claim is made in accordance with the conditions outlined in the *Early Childhood Education Funding Handbook* and that the Ministry can withhold all or some of the funding if there is a breach of any of these conditions.

|                    |  |
|--------------------|--|
| <b>Name</b>        | <input type="text"/>   |
| <b>Contact No</b>  | ( <input type="text"/> ) <input type="text"/>                      |
| <b>Signature</b>   | x <input type="text"/>   |
| <b>Date</b>        | <input type="text"/> / <input type="text"/> / <input type="text"/> |
| <b>Designation</b> | <input type="text"/>   |