

Appendix 19 - Headcount Summary Form 1

Term: Year:

Name of Provider:
 Provider Contact Name:
 Provider Contact Number:

Funded hours in half or one hour blocks (Per week)	<u>Universal</u>			<u>Extended</u>		
	Number of eligible children claiming Univ hours	Actual Weeks Period	Total Number of Univ hrs	Number of eligible children claiming Ext hrs	Actual Weeks Period	Total Number of Ext hrs
Headcount return of eligible 4 yr olds						
eg Hrs = 2.5	10	13	325	4	13	130
Total 4yr olds						
Headcount return of eligible 3 yr olds						
eg Hrs = 7	12	14	1176	4	14	392
Total 3yr olds						
Total 3&4 yr olds						
Headcount return of eligible 2 yr olds (No extended hrs)						
eg Hrs = 15	8	11	1320			
Total 2yr olds						

I confirm the details on all headcount forms are accurate, and the children for whom I am claiming Nursery Education Funding were on the register of this provision on the headcount date.

Signed: Position: Date:

(Signatory should comply with the specimen signature details supplied to Luton Borough Council)

Return by email to: nursery.headcount@luton.gov.uk or post to Early Years Performance, Business Intelligence Team, 4th Floor Town Hall, Luton Borough Council, Luton, LU1 2BQ