**Funded Early Learning (FEL) for 2, 3 and 4 Year Olds**



**Variation to the Standard Weeks Form**

**Please complete this form if you plan to vary the weeks from the Sheffield City Council’s standard model outlined below**

|  |  |
| --- | --- |
| **Name of provider** |  |
| **Address** |  |
| **Contact Telephone** |  |
| **Contact Name** |  |
| **Signature** |  |
| **Position** |  |
| **Date** |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | **SCC’s Standard Model** | | **Please detail the variation to be delivered** | | | **Insert dates for school holiday’s included in the varied weeks within the funding period**  *(half term, summer, Easter xmas etc)* |
|  | **Funding Periods** | **Weeks** | **Hours** | **Number of weeks** | **Start date** | **End**  **date** |
| **Summer Term** | 1 April  to  31 August | **13** | **195** |  |  |  |  |
| **Autumn Term** | 1 September  to  31 December | **14** | **210** |  |  |  |  |
| **Spring Term** | 1 January  to  31 March | **11** | **165** |  |  |  |  |
|  |  | **38** | **570** |  |  |  |  |

|  |
| --- |
| **Please state the reasons why you are offering these weeks;** |
|  |

**Please return this form by email to** [EYFEL.Census@sheffield.gov.uk](mailto:EYFEL.Census@sheffield.gov.uk)

**……………………………………………………………………………………**

|  |  |  |
| --- | --- | --- |
| **Completed by SCC** |  |  |
| Date Received & Logged |  |  |
| Date confirmation email sent |  |  |
| Date required action completed |  |  |