



## INSTITUTE OF EARLY CHILDHOOD DEVELOPMENT

GOVERNMENT FINANCIAL ASSISTANCE FOR PARENT WITH CHILDREN IN REGISTERED DAY CARE AND CHILDMINDING SERVICES

### REGISTERED DAY CARE AND CHILDMINDING SERVICES CONFIRMATION FORM

I. PERSONAL DETAILS		
a. Title (Mr./Mrs./Ms.): .....	b. Surname: .....	c. Given Name(s): .....
d. National Identity Number (NIN):.....		e. Date of Birth(DD/MM/YYYY):.....
f. Contact Number      Mobile:.....      WhatsApp:.....      Work Landline:.....		
g. Email Address (If Applicable): .....		
h. Name of Registered Day Care/Childminding Service: .....		
i. Registration Number of Day Care/Childminding Service: .....		
II. BANK DETAILS (for the purpose of payment of financial assistance)		
a. Bank Name: .....		
b. Bank Address: .....		
c. Account Holder's Full Name: .....		
d. Account Number: .....		
III. STATISTICAL AND CONFIRMATION DETAILS		
a. Approved Quota by MEHRD/IECD: .....		
b. Total Number of Children Registered in Service: .....		
c. Total number of Children already benefiting from the Financial Assistance ( <i>up to March 2020</i> ): .....		
d. Total Number of Children who will be benefiting from the Revised Financial Assistance ( <i>as from April 2020</i> ):.....		
IV. DOCUMENTS REQUIRED FOR SUBMISSION		

Attached with this completed form the following:

- a. A copy of valid National Identity Card of Registered Day Care Operator or Childminder
- b. A copy of Bank Account Card of the Childminder/Day Care Operator/Business
- c. A copy of Certificate of Registration with the MEHRD or IECD
- d. A copy of Certificate of Registration of Business/Company Name (if applicable)
- e. A copy of Valid National Identity card of each Shareholder (if applicable)
- f. Children Confirmation List – (IECD/CCL/2020)

## V. DECLARATION

I certify that the above information and documentation is true and complete

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**OFFICIAL STAMP HERE(If Applicable)**