This form should be used to inform of any amendments regarding a child’s hours (either increases or reductions), any change to setting including transfer to school.

Please return the completed form to [eyfssend@nottinghamcity.gov.uk](mailto:eyfssend@nottinghamcity.gov.uk)

|  |  |
| --- | --- |
| Childs Name: | Childs Date of birth: |
| Name of setting at time of application:  Date left: | Name of new setting/school: |
| Current funding allocation: | |
| Hours and/or days attending at time of application: | New hours and/or days: |
| Comments: | |
| Form completed by: | |
| Date: | |
| Office use only  Received By:  Processed On: | |

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Early Years SEND Inclusion Funding Amendments Form

**Children and Adults: Early Years**