# **Childcare Provider Grant**

# **Childcare Provider Grant- Application Form**

The Welsh Government have launched the Childcare Provider Grant to help childcare providers with the economic consequences of coronavirus (Covid-19).

The grant compliments other Government support measures (such as the Job Retention Scheme to cover 'furloughed' employees) for people and business.

You are not eligible for this grant if you have received, or have been successful in applying for support from:

- The business rate grant from your Local Authority
- Economic resilience fund for SME and microbusinesses
- Self-Employment Income Support Scheme
- Welsh Government Start Up Grant
- Third Sector Resilience Fund

In addition to the schemes above, you will not be eligible if you have received funding under the Mudiad Meithrin grant scheme as this is funded via the Third Sector Resilience Fund.

The business has not received funding from, or has	Yes / No
not been successful in applying for the grant	
schemes listed above	
The business is a childcare business	Yes / No
The business is registered with Care Inspectorate	Yes / No
Wales (CIW)	
The business was operating in Wales on or before 1	Yes / No
March 2020 and is continuing, or intends to continue	
operating in Wales	
Net income for 1 April to 30 June 2020 has	Yes / No
decreased compared to the same period in 2019 due	
to COVID-19, or your business started trading on or	
after 2 April 2019 and you made a net loss for the	
period 1 April to 30 June 2020	
The business is open or intends to fully re-open on or	Yes / No
before 14 September 2020 or, if based on school	
premises, will reopen as soon as the school allows	
The business is, or will become, a company limited	Yes / No
by guarantee, a private limited company, a	
Community Interest Company or a Charitable	
Incorporated Organisation;	
Or, alternatively, the business is a childminder <b>and</b> is	
already registered as a sole trader with HMRC	
If you employ staff, the business aims to maintain	Yes / No / N/A
employment of staff for 12 months	
The business has not applied to this scheme before	Yes / No
If applicable, Coronavirus Job Retention Scheme	Yes / No / N/A
(CJRS) declarations are up-to-date and copies will	
be provided with my application	
Do provided with my application	

If you unable to answer 'yes' to all of the questions above, you are not eligible for the scheme.

When submitting your application, please remember to attach all the required evidence documents, including proof of identification, proof of business address and bank statements. Please ensure all business related income and expenditure is clearly highlighted on bank statements. Further details can be found in the guidance document.

### SECTION 1 Your Personal Details Title Last name First name Address Relationship to business E-mail address Contact telephone number Prefer not Age 16-24 25-49 50-64 65+ to say Please tick Do you consider yourself as Prefer not to say Female Male Are you a Welsh speaker Prefer not to say Yes No

#### SECTION 2 Information about your business

Business name	Type of Childcare business
Street	
Town / City	
Local Authority	
Postcode	
CIW registration number	
HMRC Unique Taxpayer Reference or PAYE reference (if applicable)	Projected annual turnover for 2020/2021

Annual turnover for 2019/2020	Number of Childcare Places (as per CIW registration number)
Number of employees	Date business started trading
Please outline any Childcare Offer, Flying Start, Foundation Phase Nursery or Coronavirus Childcare Assistance Scheme (C-CAS) funding you have received for the period 1 April 2020 to 30 June 2020, including any amounts paid in arrears due to be paid after June: Please provide details of which scheme(s), dates received and the amounts received from each scheme:	
Please explain how the viability of your business will be affected if you do not receive the grant:	

## **Statement of De Minimis Aid received**

Have you received De Minimis Aid during the previous 3 fiscal years (i.e. current fiscal year and the previous two fiscal years):

Body providing assistance	Amount £s	Date

## SECTION 3 Impact of Covid 19 on your business

Please tick the statement that applies to your business:

£ Additio  SECTION 4  (Please  Bank N	rovide a business bank star	er 2 April 2019 and made a net loss of il 2020 to 30 June 2020  the impact on your business  tement as evidence)  Account Name  Sort Code			
£ Additio	nal information regarding to Your business bank details provide a business bank start	tement as evidence)			
£ Additio	nal information regarding t  Your business bank details	the impact on your business			
£	for the period 1 Apri	il 2020 to 30 June 2020			
£	for the period 1 Apri	il 2020 to 30 June 2020			
£	for the period 1 Apri	il 2020 to 30 June 2020			
£	for the period 1 Apri	il 2020 to 30 June 2020			
∐ The b		•			
OR					
☐ No	·				
	Expenditure 1/4/2020-30/6/202				
	Expenditure 1/4/2019-30/6/20	19 £			
	Income 1/4/2020-30/6/2020	£			
Yes	Income 1/4/2019-30/6/2019	£			
period in providing	2019 as a result of Covid-19? (th	e period 1 April to 30 June for 2019 and			
	my business has suspended business operations				
	business is partially trading				
	husings is partially trading				

#### **SECTION 5 - Declarations**

#### **SECTION 5 - Declarations**

I confirm that the information I have provided is true and accurate to the best of my knowledge;
I confirm that I have read and understood the Childcare Provider Grant Guidance document.
I confirm that my business operates in Wales
I confirm my business will undertake the obligations of the scheme outlined on the application form and in the guidance notes
I acknowledge that my local authority or the Welsh Government will undertake any appropriate business checks considered necessary to assess the application and to check the nature, use and impact of the funding in the future.
I confirm that without the grant the viability of my business will be under threat as a result of the Covid-19 pandemic.
If applicable, I confirm that our Coronavirus Job Retention Scheme (CJRS) declarations are up-to-date and copies have been provided with the application
I confirm that the business has not received funding from, and has not successfully applied for the Self Employment Income Support Scheme, Economic Resilience Fund, the Business Rate Grant, Welsh Government Start Up Grant, Third Sector Resilience (WCVA) Fund or the Mudiad Meithrin grant scheme.
I confirm that I have provided all required evidence to support my application for the Childcare Provider Grant.
I confirm that I will register for Business Wales support if my application for the Childcare Provider Grant is successful.
I confirm that I have read and understood the Privacy Notice of the Childcare Provider Grant: https://gov.wales/childcare-provider-grant-privacy-notice.

When submitting your application, please remember to attach all the required evidence documents, including proof of identification, proof of business address and bank statements. Further details can be found in the guidance document.

Welsh Government reserves the right to recover funding from individuals and businesses where false information was provided or where upon further checks, the business is not eligible for the scheme. Welsh Government may refer potentially fraudulent claims for criminal investigation.