## Childcare Voucher





Section 1 – Student Details					Section 2 – Provider Details				
Student Name		Jenny Jones			Name of Childcare Provider	M Poppins			
		22 John Street			Address:	44 John Street, Consett, Co Durham			
		Consett, Co Durham, DH8 0ZZ				DH8 OZZ			
Telephone No.		01207 555555			Email Address		mpoppins@gmail.com		
Name of Child (No. 1) Name of Child (No. 2)		John Jones			Tel. No.	01207 5666666 £6.00 Daily Rate			
					<b>Hourly Rate</b>				
Section 3 – S	essions Used (T =	Time of Session S = Si	ignature	of Lecturer)					
Verification of attendance at Childcare Provider				Verification of attendance at College					
Drop-Off Time		Pick-Up Time	AM Sessions (start and fir		art and finish time)	PM Sessions (start and finish time)		d finish time)	
Monday	8.30 am	4.30pm	T	9.00 - 10.30	11.00 - 12.00 T	1	00 - 2.30	2.45 - 4.00	
			S	A Teacher	T White S		D Black	A Teacher	
Tuesday	9.00am	4.00pm	T	9.30 - 11.30	T		30 - 3.30		
			S	B Brown	S		A Teacher		
Wednesday	8.30 am	5.00pm	T	9.00 - 10.00	10.30 - 12.00 T		.30 - 3.00	3.15 - 4.30	
			S	A Teacher	D Black S		T White	A Teacher	
Thursday	12.30рт	5.00pm	T		Т		.00 - 3.00	3.15 - 4.30	
			S		S	1	B Brown	B Brown	
Friday	8.30am	12.30pm	T	9.00 - 12.00	Т				
			S	A Teacher	S				
Total Hours 32 hours Week Commencing-Monday e.g. 09/09/24					Childcare Providers Sign	ature	М. Роррипъ		
_	•								
			to the F	<u>inance Departme</u>	ent or financial.support@derv	<u>entside.a</u>	c.uk on a weekly ba	asis, incomplete	
<u>vouchers may</u>	result in late or n	on-payment.							
Section 4 – F	or Office Use Onl	v							
		<u>.                                    </u>							
<b>Hourly Rate</b>		Daily Rate		Tots	al Amount Payable		<b>BACS Payment 1</b>	Date	