Child Information Data Correction Request Form Funded Early Education for FEET 2024-2025



						COUNTY COUNCIL	
Provider name							
URN							
Funded period to be changed							
To be completed if you Education System (EYI		•				o the Early Years and	k
Child Details							
Gender (please tick)		☐ Male			Female		
Child's full legal name							
Details to be corre	cte	ed (please		•	elevant se	 only) rect details	
Child's date of birth							
Start date							
Number of hours (from first day of claim)	h	otal ours per eek					
Declaration I confirm that all the det	tails	s provided a	re true	e and cor	rect		
Signature							

Our contact details

Telephone number

Name

Date

Email: fundedearlyeducation@surreycc.gov.uk using egress as it contains confidential data.