## Early Education Funding Spring Term 2023 Change of bank details



**Important:** Only complete this form if your bank details **have changed** since you last made a claim for funding

1. Provider deta	ils
Name of Provider	Contact Name
Address	
	Post Code
Telephone Number	DfE Number
Provider Type	☐ Childminder       ☐ Governor Managed         ☐ Independent       ☐ Private       ☐ Voluntary
2. Bank details	
Name of Bank	
Address	
	Post Code
Account Number	Sort code
Account Name	
3. Declaration	
(if your setting is a Vo	anking details given above are correct for payment of funding to this provider.  bluntary, Governor Managed or Independent setting, two signatures are required  f which must be the Committee Chair, Chair of Governors or equivalent)
Signed	
Position	
Date	
	racy Privett & Lucy Cropp, Schools, Finance and Support Team, Children's t, Dorset Council, County Hall, Colliton Park, Dorchester, Dorset, DT1 1XJ
	FOR OFFICE USE ONLY
Date Received:	
Checked by:	
Data cont to AP Too	n: