



# Inclusion Works

Term time funding for disabled children  
Early years

## Invoice/Internal charge

Purchase order number:

Date:

Name of child:

Name of early years provision:

Address of provision:

Postcode:

Telephone number:

Name of Inclusion Worker:

Date/s and time/s supported this month:

Dates supported	Times supported	Hours supported
Total hours supported:		

Total claim £8.00 X                  hours supported = £

Name of payee:

Address of payee:

School GL Code:

Please return the completed form to:

Inclusion Works, Early Years and Childcare Team, Services for Children and Young People, Plymouth City Council, Plymouth. PL1 2AA

Tel: 01752 307559

Fax: 01752 307566

Email: [earlyyears@plymouth.gov.uk](mailto:earlyyears@plymouth.gov.uk)

Web: [www.plymouth.gov.uk/inclusionworks](http://www.plymouth.gov.uk/inclusionworks)