** Appendix 4**

**Bury Metropolitan Borough Council Childrens Services**

**Private Fostering Notification**

**\*To be completed by the/proposed Private Foster Carer**

I am notifying Bury Council that I propose to undertake/have undertaken the care of the child named below and hereby provide the information required as set out in The Children (Private Arrangements for Fostering) Regulations 2005. This information is true to the best of my knowledge, understanding and belief.

|  |  |
| --- | --- |
| **Child** |  |
| Name |  |
| DOB |  |
| Gender |  |
| Address |  |
| Ethnicity |  |
| Religion |  |
| Language |  |
| **Proposed Private Foster Carer** |  |
| Name |  |
| DOB |  |
| Address (previous addresses if resided here less than 5 years) |  |
| Intended start date of and planned duration of the Private Fostering arrangement |  |
| The purpose/reason for the Private Fostering Arrangement. |  |
| Emergency Arrangements only – what date did the child come to live with you. |  |
| Information regarding any offence/s which the proposed private foster carer has been convicted  |  |
| Information regarding any disqualification or prohibition imposed on the proposed private foster carer and any such conviction, disqualification or prohibition imposed on any other person living, or employed at, his/her household.  |  |
| Information of any known offence/s or any disqualification or prohibition of any person living in the private fostering household.  |  |
| I consent to enhanced DBS checks to be completed on myself and will inform household members aged 16+ of the requirement for checks to be undertaken. |  |
| **Parent/s or those with Parental (legal)Responsibility details** |  |
| Name/s |  |
| DOB |  |
| Address |  |
| Siblings – Name, DOB and Address |  |

Yours Sincerely

Signature

Name

Date

\*Please return this notification form to the Multi agency safeguarding hub MASH Childwellbeing@bury.gov.uk

Private Fostering Lead – s.harris@bury.gov.uk

Bury Childrens Services, Higher Lane Centre, Higher Lane, Whitefield M45 7FX

**Bury Metropolitan Borough Council Childrens Services**

**Private Fostering Notification**

**\*To be completed by the Childs Mother/Father or other person with Parental Responsibility.**

I am notifying Bury Council that the child named below will be/is Privately Fostered. I hereby provide this information required as set out in The Children (Private Arrangements for Fostering) Regulations 2005. This information is true to the best of my knowledge, understanding and belief.

|  |  |
| --- | --- |
| **Child** |  |
| Name |  |
| DOB |  |
| Gender |  |
| Address |  |
| Ethnicity |  |
| Religion |  |
| Language |  |
| **Proposed Private Foster Carer** |  |
| Name |  |
| DOB |  |
| Address *(previous addresses if resided here less than 5 years)* |  |
| Intended start date of and planned duration of the Private Fostering arrangement |  |
| Emergency Arrangements only – what date did the child go to live with the Private Foster carer. |  |
| Information regarding any known offence/s which the proposed private foster carer has been convicted of. |  |
| Information regarding any known offence/s of any person living within the private foster carers household.  |  |
| Information regarding any known disqualification or prohibition imposed on the private foster carer and any such conviction, disqualification or prohibition imposed on any other person living, or employed at, his/her household.  |  |
| Information of any known disqualification or prohibition imposed on any person living in the Private Foster carers household.  |  |
| **Parent/s or those with Parental (legal)Responsibility details** |  |
| Name/s |  |
| DOB |  |
| Address |  |
| Relationship to Private Foster Carer |  |
| Siblings of Child – Name, DOB and Address |  |
| Has anyone else been involved directly or indirectly in making the Private Fostering arrangement (for example an education organisation, School sponsor) |  |
| The purpose and likely duration of the Private Fostering arrangement. |  |

Yours Sincerely

Signature