

CONFIDENTIAL

APPLICATION FOR FREE SCHOOL MEALS

Please read carefully. All applicants must complete both Sections A and D.

ELIGIBILITY

Free School Meals are available only to children whose parents/guardians are in receipt of one or more of the following benefits:

- Income Support
- Income-based Jobseekers Allowance
- An income-related Employment and Support Allowance
- Support under Part VI of the Immigration and Asylum Act 1999
- Families in receipt of Child Tax Credit will also qualify provided that (a) they are <u>NOT</u> also entitled to Working Tax Credit and (b) their annual income, as assessed by Her Majesty's Revenue and Customs, does not exceed £16,190 (from 6 April 2010, subject to annual review)
- Guarantee element of State Pension Credit

No other benefits qualify for free school meals.

SECTION A: CLAIMANT DE	TAILS (Please complete	e in block capitals)					
SURNAME	URNAME MR/MRS/MISS/MS						
NATIONAL INSURANCE NO DATE OF BIRTH							
ADDRESS							
POSTC O DE	TELEPHONENO						
RELATIONSHIP TO CHILD(REN) E.G. PARENT/GUARDIAN							
Please tick below the benefit(s) you receive:							
Income-related Employmen Support under part VI of th Child Tax Credit (but not a than £16,190. (If you received Guarantee element of State NB: YOUR APPLICATION CABY RECENT DOCUMENTAR Please give details of each school a attend different schools, a separate will be required by each of them.	e Immigration and Asylum also Working Tax Credit) also Working Tax Credit you Pension Credit ANNOT BE APPROVE Y EVIDENCE OF BENE ge child in your family atter	Act 1999 nd have an annual taxable income of less are not eligible for free school meals) D UNLESS IT IS ACCOMPANIED EFIT (SEE SECTION B) adding the same school. If your children if for each school and evidence of benefit					
Child's Name	Child's Date of Birth	Name of School					
		1					

SECTION B: EVIDENCE OF BENEFIT(S)

You will need to provide proof of eligibility before your application for free meals can be approved. The type of evidence required will depend on which benefit(s) you receive, as follows:

Benefit	Evidence required
Income Support	Your most recent letter from your Job Centre / Benefits
	Office confirming your ongoing entitlement (nb: this
Income-Based Jobseeker's Allowance	must specify the type of benefit you are receiving).
	If you are unable to supply such evidence of benefit, ask the
	Benefits Office / Job Centre which deals with your claim to
Income-related Employment and	complete and stamp Section C below, before you send the form
Support Allowance	to the school.
Child Tax Credit with an income of less	Your most recent HM Revenue and Customs TAX
than £16,190 (and NOT also receiving	CREDIT AWARD notice (Form TC602), relevant to the
Working Tax Credit)	current financial year. NB: All pages are required.
Support under part VI of the	A letter from the National Asylum Support Service (NASS)
Immigration and Asylum Act 1999	confirming such benefit
Guarantee element of State Pension	your most recent PENSION CREDIT M1000 AWARD
Credit	notice

SECTION C: DEPARTMENT FOR WORKS AND PENSION USE ONLY Please sign and stamp the statement below confirming details of benefit entitlement before returning this form to the claimant:				
I confirm that the above-named applicant is entitled to (tick as appropriate): INCOME SUPPORT INCOME-BASED JOB SEEKER'S ALLOWANCE / EMPLOYMENT AND SUPPORT ALLOWANCE (INCOME-RELATED)				
Date benefit commenced Date benefit expires				
Signature of Certifying Officer Date				
OFFICIAL STAMP:				
SECTION D – Declaration of parent/guardian				
I declare that the information given on this form is correct to the best of my knowledge and I agree				

to inform the school(s) immediately of any changes which may affect my entitlement to free school meals. I agree that the school(s) will use the information I have provided to process my claim for free school lunches and will contact other sources as allowed by law to verify my initial, and ongoing,

entitlement.

Signed Date

Important: The personal information you provide will be used for the purpose of processing this application form and will be in accordance with the principles of the Data Protection Act 1998.

FOR SCHOOL USE ONLY				
Proof of Benefit seen by		Date		
Authorised by		Date		
Parent notified		Date		
Free meals start date		End date		

PLEASE RETURN THIS FORM TO: (Name and address of School)