

APPLICATION FOR FREE SCHOOL MEALS & PUPIL PREMIUM

1 - Applicant Details - Parent / Guardian who is claiming benefit

Title: Mrs Ms Miss Mr Other

Firstname

Lastname

National Insurance Number

OR

Nat. Asylum Support Service Ref.

Date of Birth (DD/MM/YYYY)

Relationship to the child

Email

Telephone Number

Address

2. Childs Details you wish to claim Free school meals or PP for

Firstname

Surname

Childs Date of Birth (DD/MM/YYYY)

Gender

3. Please tick which Benefit the above applicant is currently receiving:-

Income Support

Income-based Jobseekers Allowance

Income-related Employment and Support Allowance

Support under part VI of the Immigration and Asylum Act 1999

The guaranteed element of Pension Credit

Child Tax Credit (provided you're not also entitled to Working Tax Credit and have an annual gross income of £16,190)

Working Tax Credit run-on-paid for 4 weeks after you stop qualifying for Working tax Credit

Universal Credit - if you apply on or after 1 April 2018 your household income must be less than £7,400 a year (after tax and not including any benefits you get)

All claims are checked on an online checking system called OFSM. This only confirms or denies your eligibility to claim Free School Meals: it does not give us any other information. Please see their website for details on how your information is used.

4. Declaration

- * I understand that my entitlement to free schoolmeals will only continue as long as I receive one of the relevant Support Payments.
- * I will inform you immediately if my entitlement to any of the Support Payments is terminated.
- * I understand you immediately is my entitlement to any of the Support Payments is terminated.
- * I understand that if I do not inform you and my child continues to receive free meals I will have to repay the cost of any meals taken.
- * I will inform you immediately if I change my address.
- * I declare that I am legally responsible for the child I am claiming for.
- * I certify that the above information given by me on this form is true and correct.

Signature _____ Date _____

Please return this form to:- Mrs R Lang, Lawn Primary School, Norbury Close, Allestree Derby, DE22 2UU.