

APPLICATION FOR FREE SCHOOL MEALS (Part 1)

(To be completed and signed by the Parent/Guardian)

Parent's/Guardian's Surname		First Name
Parent's/Guardian's D.O.B.		
National Insurance Number or Asylum Support Reference Number		
Partner's Surname	First Name	
Partner's D.O.B.		
National Insurance Number or Asylum Support Reference Number		
Address		
Post Code	Telephone	
Name of Pupil	Pupil's D.O.B.	Name of School/College
	1	1

In order to qualify for Free School Meals, the parent/guardian must be in receipt of one of the following:

- Income Support
- Income Based Job Seeker's Allowance
- Support under part VI of the Immigration and Asylum Act 1999
- Child Tax Credit, provided neither you nor your partner is entitled to Working Tax Credit and
 have an annual income of less than the current threshold of £16,190. If you or your partner is in
 receipt of Working Tax Credit, you are **not** entitled to Free School Meals, even if your annual
 income is below the current threshold of £16,190.
- The 'Guarantee' element of State Pension Credit
- Income Related Employment and Support Allowance

Qualifying documentary evidence (see Guidance Notes) must accompany this completed Application Form. Free School Meals will not be supplied without proof of eligibility.

PLEASE TICK THE TYPE OF QUALIFYING BENEFIT YOU RECEIVE

□ Income Support

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Please supply all pages of a letter from the DWP/Jobcentreplus showing that you are in receipt of Income Support and dated within the last four months, including the first page containing details of your name and address.

Income Based Job Seeker's Allowance

Please supply all pages of a letter showing that you are in receipt of **INCOME BASED** jobseeker's allowance and dated within the last four months, including the first page containing details of your name and address.

□ Support under Part VI of the Immigration and Asylum Act

Please supply a recent copy of your NASS letter confirming this entitlement.

□ Child Tax Credit (income less than £16,190)

Please supply all pages of your Child Tax Credit Award for the current Financial Year. If you or your partner is in receipt of Working Tax Credit, you are **not** entitled to Free School Meals, even if your annual income is below the current threshold of £16,190.

Guaranteed State Pension Credit

Please supply a copy of your M1000 Pension Credit Award dated within the last four months, which clearly shows that you are in receipt of the Guaranteed Element of the State Pension Credit.

Income Related Employment Support Allowance

Please supply all pages of the letter from DWP/jobcentreplus dated within the last four months, including the first page containing details of your name and address.



DECLARATION (Part 2)

I declare that the information I have supplied on this form is correct and complete to the best of my knowledge.

I understand that I must provide relevant qualifying documentary evidence, as listed, with this form.

I understand that I am responsible for informing the school immediately if my circumstances change, which may affect my entitlement to receive Free School Meals.

I understand that if I give information that is incorrect or incomplete, or if I fail to report any changes which may affect my entitlement to receive Free School Meals, then I may be asked to pay for any free school meals provided.

I authorise Surrey County Council/Babcock 4S to make any necessary enquiries to verify the information on this form and to cross check the information I have supplied with the Benefits Agency/Tax Office/Job Centre.

By signing this form I am confirming that I have read and fully understood the above declaration.

Signature
Date
The section below must be completed if this form has been completed on behalf of the parent/guardian:-
I have completed this form on behalf of the parent/guardian. I confirm that the parent/guardian fully understands each question and that the answers I have supplied on their behalf are true and correct.
Name
Address
Vous relationship to the persent/guardien (e.g. postner brother lendlerd friend advise worker
Your relationship to the parent/guardian (e.g. partner, brother, landlord, friend, advice worker, appointee)
Signature of the person who completed this form
Date
Date