

FREE SCHOOL MEALS APPLICATION FORM

1. ABOUT YOUR CHILD / CHILDREN

Child's Last Name	Child's First Name	Child's Date of Birth			Name of School
		DD	MM	YYYY	
		DD	MM	YYYY	
		DD	MM	YYYY	

2. PARENT / GUARDIAN DETAILS

	Parent/Guardian 1		Parent/Guardian 2																	
Last name																				
First Name																				
Date of Birth	DD	MM	YYYY	DD	MM	YYYY														
National Insurance Number*																				
National Asylum Support Service (NASS) Number*		/		/						/		/								
Daytime Telephone Number																				
Mobile Number																				
Address																				
	Postcode:		Postcode:																	

3. FAMILY INCOME AND BENEFIT DETAILS

If you receive any of the benefits listed below, please place an X in this box.

- Income Support
- Income-based Jobseekers Allowance
- Income-related Employment and Support Allowance
- Support from NASS under part 6 of the Immigration and Asylum Act 1999

- the guarantee element of Pension Credit
- Working Tax Credit run-on
- Child Tax Credit (with no Working Tax Credit)

Child Tax Credit

If you are in receipt of **Child Tax Credit**, is your joint gross annual income over £16,190 per year? (Please place an X in the appropriate box).

Your joint gross income is your household income before taxes are taken into account.

Yes No Unsure

- Universal Credit.

Universal Credit

If you are in receipt of **Universal Credit**, is your net earned family income over £7,400 per year? (Please place an X in the appropriate box).

Your net earned income is your household income after taxes and deductions. It does **not** include income through Universal Credit or other benefits that you may receive.

Yes No Unsure

If you're not sure whether you receive one of the listed benefits, or what your household income is, but you would still like us to check whether your child is eligible for free school meals, please place an X in this box.

DECLARATION

The information I have given on this form is complete and accurate. I understand that my personal information is held securely and will be used only for local authority purposes. I agree to the local authority using this information to process my application for free school meals. I also agree to notify the local authority in writing of any change in my family's financial circumstances.

Signature of parent / guardian:

Date:.....

Thank you for completing this form and helping to make sure your child/ren receive Free School Meals and that your child/ren's school is as well funded as possible.

Please return the form:

By email to: revenuessystemteam@tameside.gov.uk

By post to: PO Box 304, Ashton-under-Lyne, Tameside OL6 0GA

How the information in this form will be used

The information you provide in this form will be used by the council to confirm receipt of one of the listed welfare benefits and make sure your child/ren receives free school meals if they are in year 3 or above. Once this is confirmed, this helps to decide how much money your child's school will receive each year.

You only need to complete this form once and it will last for the duration of your child's time at their current school. You should contact the school or local authority if you have a change in financial circumstances.

We are committed to ensuring that the personal and sensitive information that we hold about you is protected and kept safe and secure, and we have measures in place to prevent the loss, misuse or alteration of your personal information. We will use the information you provide to assess entitlement to free school meals. The information may also be shared with other Council departments to offer benefits and services.