

# APPLICATION FOR FREE SCHOOL MEALS

NEW APPLICATION / REASSESSMENT / REINSTATEMENT

(Please read notes overleaf carefully before completing)

**CONFIDENTIAL**

**SECTION A** (PLEASE PRINT IN CAPITAL LETTERS)

Parent/Guardian's Surname	First Name (in full)	Title (eg. Mrs)	Date of Birth	*Delete as applicable
1. (Person Claiming Benefit)				*Mother/*Father/ *Guardian
2.				*Mother/*Father/ *Guardian
<b>Full Address:</b>				
			<b>Postcode:</b>	
<b>Home/mobile no:</b>		<b>Email Address:</b>		

List **ALL the children that live with you**, of school age as well as any child who is attending Nursery School. Please write 'N' against the Nursery School name

**SECTION B**

Legal Name of Child(ren)		Date of Birth	Age	Name of School attended by Child(ren)	OFFICE USE ONLY
Surname	First Name				

**SECTION C (please tick which benefit applies)**

Income Support  Employment Support Allowance (Income Related)  Income Based Jobseekers Allowance  Guarantee Element of State Pension Credit

Receives Child Tax Credit only (**No Working Tax Credit**) and your taxable income is below £16,190 (as shown on your tax credit award summary, TC602) or a 4 week Working Tax Credit run on  Supported under Part VI of the Immigration and Asylum Act act 1999

**(Working Tax Credit does NOT qualify you for Free School Meals, unless you are claiming a 4 week Working Tax Credit Run on)**

**PROOF MUST BE PROVIDED WITH THIS APPLICATION FORM  
FOR HELP AND MORE DETAILS PLEASE SEE OVERLEAF**

NATIONAL INSURANCE NUMBER: (person claiming benefit)

**SECTION D**

**3. DECLARATION** (This **MUST** be signed by the person claiming benefit).  
 I certify that the information given is to the best of my knowledge and belief correct and I undertake to notify the Council immediately of any change to the circumstances set out on this form. I understand that the Council may check any of the facts given with other agencies.

Signed ..... Date .....

COMPLETED FORMS TO BE RETURNED TO: Clare Perkins  
 ● Southern Area Education Office ● St Edmund House ● Rope Walk ● Ipswich ● Suffolk ● IP4 1NF  
 PLEASE MAKE SURE YOU HAVE ENCLOSED PROOF OF YOUR BENEFIT.  
 YOUR FORM WILL BE RETURNED AND YOUR CLAIM DELAYED IF PROOF IS NOT PROVIDED

**SECTION E - FOR OFFICE USE ONLY**

Documents seen:	Parent/Guardian Notified:	Claim closed:
Benefit with effect from:	Schools informed:	Claim rejected:
Checked by:	Entitled from:	Reassessment due:

# NOTES TO HELP YOU WHEN COMPLETING YOUR FREE SCHOOL MEALS APPLICATION FORM

## Section A

Please make sure you print your details in **CAPITAL LETTERS**. Fill in all the boxes, putting 'N/A' if any box does not apply to you.

It is important to include your name(s) and your partner's name(s), (if any), together with your full address, postcode and date of birth (this is required by other agencies if further checks are needed). It is especially important to let us have in box 1 the name of the person claiming the qualifying benefit.

## Section B

We need to know the names of ***all the children that live with you*** (of school age) and their schools, as well as any child who is attending nursery school, but not those who attend Colleges of Further Education. Please note you can only apply for free school meals for children that live with you and that you are financially responsible for (You should be claiming Child Benefit and Child Tax Credit for each child).

## Section C

1. We need to see proof of your benefits. This proof can be either:
  - a recent DWP letter (received within the last three months) stating you are entitled to Income Support, Employment Support Allowance (Income Related) or Income-Based Jobseekers Allowance
  - a Pension Credit M1000 award notice
  - a Tax Credit Award Notice (TC602).

You can post or bring the completed form and suitable documentation to the address shown on the front of this form, or take it to your child's school.

If you do not have any of the above documentation, please contact your Benefits Delivery Centre, The Pension Credit Office or The Inland Revenue for proof of entitlement. Bank Statements are not acceptable evidence of entitlement, as they do not state a benefit name. Forms received with no accompanying documentation or insufficient/incorrect proof will be returned and your application delayed. Free School Meals will only start when your application has been processed by this office.

2. You **MUST** let us have the National Insurance Number of the person claiming the benefit. You can find this on your unemployment documents, on a letter from the DWP or on your TC602. This may also be known as your reference number. It has 9 letters and numbers, and looks similar to this:

AB 12 34 56X

## Section D

Please read the declaration before signing the form and remember that the person claiming the benefit must be the one to sign and date the form. Also note that you must let this office know immediately if you are no longer eligible for free school meals. Failure to do so may result in you being asked to pay for meals already taken after your circumstances changed.

## Section E

This is for our use only. You should not fill it in.

**If you need any further assistance in completing the form please telephone 01473 584784 and ask for Free School Meals.**