



APPLICATION FOR FREE SCHOOL MEALS

This form will need to be completed by the Parent/Legal Guardian of the child/children for whom Free School Meals are being claimed and who is in receipt of one of the following benefits

	YES/NO
Income Support	
Income Based Jobseeker's Allowance	
Guaranteed element of State Pension Credit	
Income-related Employment and Support Allowance (IR)	
Child Tax Credit, provided they are not entitled to Working Tax Credit and have an annual income (as assessed by HM Revenue & Customs) that does not exceed £16,190 PLEASE NOTE: If you receive Working Tax Credit you do not qualify.	
Support under Part VI of the Immigration and Asylum Act 1999	

If yes, please provide documentary proof (as overleaf) and complete this form.

Name of Applicant: _____ Relationship to pupil(s): _____

Full Address: _____ Post Code: _____

Tel. No: _____

National Insurance No:

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Date of birth of Applicant _____

Please enter the full details of each dependent child that meets the criteria listed above.

Full Name(s)	Date of Birth	Name of School	Is each child living with you? YES/NO

Proof of Entitlement:

Any one of the following documentary evidence will be accepted as proof of your entitlement to the qualifying benefit:

- ❖ submission of a recent letter from Jobcentre Plus confirming that you are currently in receipt of **Income Support or Income-related Employment and Support Allowance (IR)**
- ❖ submission of your '**Pension Credit M1000 Award Notice**'
- ❖ submission of your complete H.M. Revenue & Customs Notification confirming that you are in receipt of **Child Tax Credit with an annual income that does not exceed £16,190** and that you are **NOT entitled to Working Tax Credit**
- ❖ submission of documentary evidence confirming your support under the **Immigration and Asylum Act 1999**

Declaration:

I agree that you will use the information I have provided to process my claim for free school lunches and will contact other agencies (Jobcentre Plus, Dept of Work & Pension, H.M. Revenue & Customs) as allowed by the law to verify my initial, and ongoing, entitlement.

I understand that the results of any free school lunch eligibility check may also be used to assess my entitlement to receive a school uniform grant for a Year 7 pupil.

I declare that the information given on this form is a correct statement of my circumstances and I undertake to notify the Authority **immediately** of any changes in my circumstances. I understand that the Ceredigion Education Department reserves the right to take suitable action should it be discovered that a false declaration of income has been made or my situation has changed and I have ceased to be entitled to Free School Meals.

Signature of Applicant: _____

Date: _____

If you would prefer your confirmation letter, and future correspondence regarding Free School Meals, to be by e-mail then please enter your e-mail address below:

E-mail address: _____

Please return this application form, along with the appropriate documentary evidence, to:

**The Data Unit
Department of Education & Community Services,
Canolfan Rheidol,
Rhoddfa Padarn,
Llanbadarn Fawr,
ABERYSTWYTH,
Ceredigion, SY23 3UE**

All documentary evidence will be immediately returned to you.