



## APPLICATION FOR FREE SCHOOL MEALS

A pupil whose parent / carer receives the following benefits is entitled to a free school meal:

- Income Support (IS)
- Income Based Job Seekers Allowance (IBJSA)
- Employment and Support Allowance (Income Related) (ESA (IR))
- Child Tax Credit (CTC), **provided you do not also receive Working Tax Credit** and have an annual income, as assessed by the Inland Revenue, that does not exceed £16,190
- Guarantee Credit element of State Pension Credit
- Support under Part 6 of the Immigration and Asylum Act 1999

**Children who receive IS or IBJSA in their own right are also entitled to free school meals.**

***PLEASE SUPPLY PROOF OF YOUR ENTITLEMENT.***

**THIS APPLICATION MUST BE COMPLETED BY THE PERSON IN RECEIPT OF THE BENEFITS.**

PLEASE WRITE CLEARLY IN BLOCK CAPITALS AND BLACK INK

**Parent / Carer Details**

<b>Mr / Mrs / Miss / Ms</b>		<b>Family Name</b>	
<b>First Names</b>			
<b>Home Address</b>			
<b>Postcode</b>		<b>Telephone No</b>	
<b>Date of Birth of Parent / Carer</b>		<b>Male / Female</b>	

National Insurance Number

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Or NASS Reference Number

(The NASS reference taken from the Home Office letter is e.g. 06/06/01234/001 should be entered as 060601234)

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**Relationship to the Child / Children**      Mother       Father       Carer

See overleaf:

**Child / Children's Name**

Enter below details of **ALL** children living with you at the above home address  
EXCEPT FOSTER CHILDREN

	<b>Surname</b>	<b>First Name</b>	<b>Date of Birth</b>	<b>Tutor Group</b>
<b>Child 1</b>				
<b>Child 2</b>				
<b>Child 3</b>				
<b>Child 4</b>				
<b>Child 5</b>				

The information you have provided in this form will be used to check the FSM eligibility against a national database.

**Parent / Carer Consent**

I declare that all the information given on this form is to the best of my knowledge and believe correct in every respect. I agree that you will use the information I have provided to process my claim for free school lunches and will contact other sources as allowed by law to verify my initial, and ongoing, entitlement. I undertake to notify Ken Stimpson Community School in writing of any change to my financial position. If I stop receiving any of the above entitlement I am aware that if I fail to notify the school and my child / children continue to receive Free School Meals without being entitled to them then I will be invoiced by the school to meet the costs. Any queries please contact Mrs D Brackenbury at Ken Stimpson Community School on 01733 765950.

Signature of Claimant  Date

**Please return completed form to:**

Mrs D Brackenbury  
Ken Stimpson Community School  
Staniland Way  
Werrington  
Peterborough  
PE4 6JT

<b>Office Use Only</b>				
<b>Proof of NI / NASS Seen</b>	<b>Awarded From</b>	<b>End Date</b>	<b>Review Date</b>	<b>Class</b>