

Dear Parent/Guardian,

We are asking parents/carers whose children attend a Southwark school to complete this form if you believe you have a statutory entitlement to Free School Meals. For anyone applying after 1st April for free school meals the parent/carer will have to complete this form once as the claim will expire on in March 2023 due to the rollout of Universal Credit.

Registering for free meals could also raise an extra [£1,320 for your child’s primary school]/ [£900 for your child’s secondary school], to fund valuable support like extra tuition, additional teaching staff or after school activities. Please contact the school for this information or look at your school newsletter from your child’s school.

Please return your application directly to your child’s school which will then be processed in confidence by the local authority.

**Criteria for eligibility for Free School meals**

Families who receive certain benefits may be eligible for free school meals. **Your child is eligible for free school meals if you’re in receipt of one of the following benefits:**

* Universal Credit with an annual net earned income of no more than £7,400.
* Income Support
* Income-based Jobseeker’s Allowance
* Income-related Employment and Support Allowance
* Support under Part 6 of the Immigration and Asylum Act 1999
* The guarantee element of Pension Credit
* Working Tax Credit run-on (paid for the four weeks after you stop qualifying for Working Tax Credit)
* Child Tax Credit (with no Working Tax Credit) with an annual income of no more than £16,190

This additional money is available from central government for every child whose parent is receiving one of the benefits listed above.

**ABOUT YOUR CHILD/CHILDREN**

Please complete all sections of this form using black ink and BLOCK CAPITALS

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Child’s First Name | Child’s Last Name | Class | Child’s Date of Birth | | | Name of School |
|  |  |  | D D | M M | Y Y Y Y |  |
|  |  |  | D D | M M | Y Y Y Y |  |
|  |  |  | D D | M M | Y Y Y Y |  |

**PARENT/GUARDIAN DETAILS**

Please complete all sections of this form using black ink and BLOCK CAPITALS

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Parent/Guardian | | | | | | | | | | | | | | | | | | |
| Last name |  | | | | | | | | | | | | | | | | | | |
| First Name |  | | | | | | | | | | | | | | | | | | |
| Date of Birth | D D | | | | | M M | | | | | Y Y Y Y | | | | | | | | |
| National Insurance Number\* | L | | L | | 1 | | 2 | | 2 | | | 2 | | 5 | | l | | L | |
| National Asylum Support Service (NASS) Number\* |  |  | |  | |  | |  | |  |  | |  | |  | |  | |  |
| Daytime Telephone Number |  | | | | | | | | | | | | | | | | | | |
| Mobile Number |  | | | | | | | | | | | | | | | | | | |
| Address | Postcode: | | | | | | | | | | | | | | | | | | |

**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
* Child Tax Credit (with no Working Tax Credit)
* Working Tax Credit run-on
* 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

**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

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 as set out in this form.

**Signature of parent/guardian:** …………………………………………………………………………………..

**Date:** ………………………………………………………………………………………………………………….

**Thank you for completing this form and helping to make sure your child’s school is as well funded as possible.**

**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. Once this is confirmed, this helps to decide how much money your child’s school will receive each year.

The information will also be used in relation to pupils in year 3 or above to decide whether they are eligible for free school meals.

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.