



South Tyneside Council

Children and Young People's Directorate

APPLICATION FORM FOR FREE SCHOOL MEALS

This form should be completed in ink or biro and only where parents, or children in their own right, receive one of the benefits listed below. Please return to your child's school.

CAPITAL LETTERS

Surname of Applicant: Initials:

National Insurance No..... Applicants Date of Birth

Address:

Tel. No.: Relationship to Pupil(s):

1. Set out below the name, date of birth and school etc., of each dependent child who is living at home and is under school leaving age, including children at nursery.

Surname	Forename	Date of Birth	School

2. Your child(ren) will be entitled to receive free school meals if you are in receipt of one of the following benefits:

- Income Support;
- Income Based Jobseekers' Allowance;
- an income-related employment and support allowance (this benefit was introduced on 27 October 2008)
- Support under Part VI of the Immigration and Asylum Act 1999;
- your income does not exceed £16,190 (if you are entitled to **Working Tax Credit** you will **NOT** be eligible for free school meals);
- Guaranteed Element of State Pension Credit.

You must provide proof of entitlement to one of these benefits. Please see overleaf for the type of proof required.

3. I certify that the information given above is, to the best of my knowledge and belief, correct and I undertake to notify my child's school IMMEDIATELY should my entitlement to benefit cease. I understand that Children and Young People's Directorate may check the validity of this application with the Benefits Agency.

Signature of Applicant: Date:

AN APPLICATION FOR THE PROVISION OF FREE SCHOOL MEALS WAS RECEIVED FROM:
Name of Applicant: on

By: at : School.