

Application for Free School Meals/ Pupil Premium Funding Please complete all sections of this form using black ink and BLOCK CAPITALS

1. PARENT/GUARDIAI	N DETAILS					
Title						
Surname/Family nam	ie					
First name						
Date of birth						
National Insurance number						
National Asylum Seeker number						
Day time telephone nu	ımber					
Parent/Guardian's curr	rent address					
Email address						
By providing an email addr	ess you are agreeing to	receive th	e res	ponse by email		
2. CHILD/CHILDREN'S (Please include all children * Surname:		*Data		children you are fostering * School:	Relationship child	to
		1	1		Child	
		 	,			
		 				
		 	1			
		1	1			
		1	1			
3. FAMILY INCOME AI	ND BENEELT DETA	11 6				
*Please ☑ the corresponding benefit you ar receiving				Universal Credits		
Income Support				Income Based Job Seekers allowance		
			+=	Guarantee element of State Pension		+
Income Related Employment Support Allowance						
Child Tax Credit with an annual income less than £16,190				Support under part VI of the Immigration & Asylum Act 1999		
Families in receipt of W	orking Tax Credit ar	e not elig	gible	for Free School Meals an	nd Pupil Premium.	
I understand that my information Protection Act 1998 and available, to verify my init connection with this claim using the secure benefit of the Local Authority handless.	rmation is being held I will be shared with oth tial and ongoing entitle n. I give permission for checking system to co es personal data plea	by Cambi er bodies ement and the Edu- enfirm my se see a	ridges s adm d also cation entitl copy	shire County Council in acc inistering public funds to do o for the prevention and de n Welfare Benefit Service to ement to education benefit	cordance with the Da letermine the support tection of fraud in o make periodic chec ts. For information or	t cks
*Signed:		_ *D	ate:_			