## **Turney School**

## FREE SCHOOL MEAL APPLICATION FORM

CHILDREN WHOSE PARENTS/CARERS RECEIVE ANY OF THE FOLLOWING ARE ENTITLED TO FREE SCHOOL MEALS:

- Income Support (IS)
- Income based Job Seeker's Allowance (IBJSA)
- 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
- The Guarantee element of the State Pension Credit
- Income related employment and support allowance
- Support under Part VI of the Immigration and Asylum Act 1999
- Working Tax Credit during the four-week period immediately after their employment finishes or after they start to work less than 16 hours per week
- Universal Credit \*\*

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

\*\*Universal credit - During the Universal Credit pathfinder which started on 29th April 2013 children in families in receipt of Universal Credit will be entitled to FSM. [When all families are moved to Universal credit the criteria will change. This is yet to be determined by the DfE]

Administration for the provision of free school meals is undertaken by the school. This form should be completed and returned to your child's school.

4 DETAILS OF PARENTICARED WITH QUALIFYING REVIEW. COMPLETE IN DLOCK

1. DETAILS OF PARENT/CARER WITH QUALIFYING BENEFIT - COMPLETE IN BLOCK		
SURNAME/FAMILY NAME as it appears on your benefit letter:		
INITIAL:	TITLE:	DOB
		dd/mm/yyyy:
NATIONAL INSURANCE NUMBER:	OR NATIONAL ASYLUM SEEKER NUMBER:	
2. DETAILS OF CHILD / CHILDREN REQUIRING FREE SCHOOL MEALS		
SURNAME	FIRST NAME	DATE OF BIRTH
3. DECLARATION		
I declare that the information given on this form is true and complete and I undertake to inform the school if my entitlement to one of the qualifying benefits is terminated I understand that I will be liable for anycosts incurred in providing free school meals for my child(ren), should I fail to inform the school of the termination of my benefit.		
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 to free school lunches.		
I have read and I understand the above declaration.		
SIGNATURE (Parent/Guardian):	DATE	<u>:</u> :