Application for Free School Meals



Please note that Free School Meals cannot be backdated. Applications can only be considered from the date the local authority receives your form.

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Parent/Guardian 1				Parent/Guardian 2					
DD MM		Y	YYY	DD		MM	YYYY		
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Children's Details

Forename*	Surname*	Date of Birth*	Year Group*	Name of School*

You can also get advice or help completing the form by contacting us on 0191 643 2288 option 3

Declaration

The information I have given on this form is complete and accurate. I understand that my persona
information is held securely and will be used only for local authority purposes. I agree to notify the
local authority in writing of any changes in family's financial circumstances as set out in this form.

Signature of parent/guardian	Date
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	sehold Situation ne below that apply to yo	ou						
Universal (Credit with an annual ne	t earned inc	ome of no more tha	n £7,400				
Child Tax	Child Tax Credit (with no Working Tax Credit) with an annual income of no more than £16,190							
Working Ta	Working Tax Credit run-on (paid for the four weeks after you stop qualifying for Working Tax							
	Credit) Support Under Part 6 of Immigration and Asylum Act 1999							
Guarantee	Guarantee element of Pension Credit							
My child is	My child is in Key Stage 1 (Reception, year 1 or year 2)							
Children who rece School Meals.	ive any of the above ber	nefits in thei	r own right are also	eligible to receive Free				
The information yo	efits. Once this is confin			nfirm receipt of one of the much money your child's				
The information w	ill also be used to decide	e whether th	ey are eligible for fr	ee school meals.				
	•		-	our child's time at a North e a change in financial				
protected and kep alteration of your p	t safe and secure, and wersonal information. We als. The information may	ve have mea will use the	asures in place to proinformation you pro	that we hold about you is event the loss, misuse or vide to assess entitlement uncil departments to offer				
Please complete ALS – Student St East Wing Norham High Sch Alnwick Avenue NE29 7BU	upport	Or	Complete the on My.northtyneside.	line form gov.uk/freeschoolmeals				
Date requested		Office use o Date Re	nly: ceived					
Date ECS Checked			d by	Result Yes/No				

Other action taken _____