

## APPLICATION FOR FREE SCHOOL MEALS

Housing Benefit Reference Number (if applicable): \_\_\_\_\_

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

SECTION A: APPLICANT & PARTNER DETAILS (Please do not enter any child(ren) details in Section A)												
<b>(Applicant) Title:</b>	Full Name:  Email:	National Insurance Number: <table border="1" style="width: 100%; height: 15px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td> </tr> </table> Date of Birth:										
<b>(Partner) Title:</b>	Full Name:  Email:	National Insurance Number: <table border="1" style="width: 100%; height: 15px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td> </tr> </table> Date of Birth:										
Address: _____												
Postcode: _____ Telephone Number: (incl STD code) _____												
Relationship to Child(ren): _____												

SECTION B: CHILD DETAILS (please complete LEGAL surname if the child is referred to by another name)				
Forename	Surname	Gender	Date of Birth	Name and Address of School

SECTION C: DECLARATION (Please read before signing)	
<input checked="" type="checkbox"/> I declare that the information provided on this sheet is correct. <input checked="" type="checkbox"/> I understand that knowingly giving false information may lead to legal proceedings. <input checked="" type="checkbox"/> I will tell you immediately of any change in my circumstances that may affect my claim for Free School Meals. <input checked="" type="checkbox"/> I agree to inform you straight away of any change in my contact details. <input checked="" type="checkbox"/> I understand that you will use the information I have provided to process my claim for Free School Meals and may contact other sources as allowed by law to verify my details. <input checked="" type="checkbox"/> I understand that the results of any Free School Meal eligibility check may also be used to assess my entitlement to 'additional' benefits.	
Signature of Applicant:	Date:

FOR SCHOOL USE ONLY	
Name of School Signatory:	Signature:

FOR OFFICE USE ONLY	
ECS checked by:	Free School Meals awarded? YES / NO

## **GUIDANCE NOTES**

### **Applicant/Partner:**

If you have a partner, you should include their details too as if we carry out a check and it is unsuccessful, we will automatically check your partner's details to try to establish entitlement.

### **Eligibility**

1: Free School Meals can only be awarded if you or your partner is in receipt of one of the following qualifying benefits:

- a) Income Support or Income Based Job Seekers Allowance
- b) Income-related Employment and Support Allowance
- c) Universal Credit if **NET** earnings do not exceed £616.67 per month or £7,400 per year
- d) Pension Guarantee Credit
- e) Child Tax Credit, where Working Tax Credit is **NOT** in payment **AND** your annual income does not exceed £16,190 (as determined by HM Revenues & Customs)
- f) Working Tax Credit 'Run On' (A 4 week payment when your employment has ceased or your working hours reduce below 16)
- g) Support under Part VI of the Immigration & Asylum Act 1999

2: If you have completed **SECTION A** overleaf in full, you will only be required to submit evidence of entitlement in the event that your eligibility cannot be confirmed. We will contact you separately if we require further information with reference to your income.

3: Due to Government changes, if you are entitled to free school meals after 1<sup>st</sup> April 2018, you will receive the free meals until at least March 2025. This is irrelevant of your circumstances. You **MUST** notify us if your child(ren) change schools in this period in order to ensure our records are accurate.

4: Free School Meals will only be awarded on receipt of a completed, approved application form and will commence from that date. Please note: **Applications cannot be backdated.**

5: You only need to complete one application form for all your children, even if they attend different schools within Herefordshire Council's jurisdiction. If you have more than 6 children, only then do you need to complete an extra form.

6: Applications can only be made for children attending a school within Herefordshire local authority. If your child(ren) attend a school in a different authority, your application for Free School Meals should be made to that authority, even if you reside within Herefordshire.

7: Please send your completed application to one of the following:

- Revenues and Benefits Service, Herefordshire Council, Plough Lane, Hereford. HR4 0LE – **You can also scan and email this completed application to us at [revsandbenssupport@herefordshire.gov.uk](mailto:revsandbenssupport@herefordshire.gov.uk)** (please ensure it has been signed)
- Your Child's School