

## APPLICATION FOR FREE SCHOOL MEALS

The quickest way to apply is online at

[www.staffordshire.gov.uk/freeschoolmealsapplication](http://www.staffordshire.gov.uk/freeschoolmealsapplication) and get an instant answer

<b>Claims cannot be processed without the Date of Birth (D.o.B) and National Insurance Number or National Asylum Support Service Number of the Claimant</b>									
Full name of claimant:								(Mr/Mrs/Miss/Ms)	
Address:									
						Postcode:			
D.o.B of claimant				Telephone:					
National Insurance Number or National Asylum Support Service Number									
<b>Children for whom you are claiming</b>									
Legal First Name	Legal Surname	M/F	D.o.B	School	Relationship to Claimant				

I wish to claim Free School Meals for the above children. I confirm that I have parental responsibility for the child(ren) and am either eligible for and/or in receipt of one of the following (please tick):

Child Tax Credit but <u>do not</u> receive Working Tax Credit and that my annual household income is less than £16,190 (PLEASE NOTE IF YOU ARE RECEIVING WORKING TAX CREDIT, OR IF YOU HAVE A PARTNER AND THEY ARE RECEIVING WORKING TAX CREDIT, REGARDLESS OF INCOME, YOU WILL NOT QUALIFY)	
Income Support	
Income-Based Job Seekers Allowance	
Income Related Employment and Support Allowance	
The Guarantee Element of State Pension Credit	
Universal Credit	
or that I am an Asylum Seeker	

**I certify** that the information I have given is correct.  
**I will** tell the **Local Authority and the school** if I stop receiving these benefits or if there are any other relevant changes in my circumstances (such as my address)  
**I understand** that it is fraudulent to give false information.  
**I agree** that in order for you to process my claim for free school meals you may contact any other sources as allowed by law to verify my initial and ongoing entitlement  
**I agree** and request a free school meal application is made and the information I have provided is used to determine entitlement and make an application for any other siblings as they join Staffordshire schools

Signature of claimant: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE NOTE CLAIMS WILL NOT BE BACKDATED

When completed this form should be returned to:  
 Free School Meals Entitlement Team, Floor 6, Block A, Tipping Street, Stafford, ST16 2DH

**FOR OFFICE USE:**

NEW CLAIM		ENTITLED		START DATE		GRANTED UNTIL	
RENEWAL							
HUB CHECK		DATE		ASSESSED BY			

