

FREE SCHOOL MEAL APPLICATION FORM

Eligibility to Free School Meals

Parent/carers of children who are entitled to any of the following benefits are entitled to free school meals:

- Income Support
- Income-based Jobseekers Allowance
- Income-related Employment and Support Allowance
- Support under Part VI of the Immigration and Asylum Act 1999
- The guaranteed element of State Pension Credit
- Child Tax Credit only, provided your annual household income (as assessed by HM Revenue & Customs) does not exceed £16,190. Anyone entitled to Working Tax Credit is not entitled to free meals regardless of income
- Working Tax Credit run-on paid for 4 weeks after you stop qualifying for Working Tax Credit
- Universal Credit

In January 2011, the Government introduced the Pupil Premium. Children entitled to free school meals will earn their school additional funding to help with their child's education. If you think you may be entitled to free school meals please complete this form and return it to your school, or telephone 023 9268 8830 or 023 9268 8101 for further information.

For further details please use the following link: https://www.gov.uk/apply-free-school- meals

You may qualify for assistance with transport to school

Children entitled to Free School Meals may also be entitled to assistance with transport to school if they meet the criteria set out in the Home to School Transport Policy.

Forms and guidance notes can be collected from your child's current school, from the Civic Offices, Guildhall Square or they can be downloaded from the Portsmouth City Council website.

Please return the form to:

Karen Madgewick **Access & Entitlement Assistant** Floor 2 Core 5/6 **Portsmouth City Council Civic Offices Guildhall Square Portsmouth** PO1 2EA

e-mail: karen.madgewick@portsmouthcc.gov.uk

Telephone 023 9268 8101

For Office Use Only: Yes/No	
Date Initial	



Education – Inclusion Service

Please complete all sections carefully					
Full name of Paren	t/Carer (the persor	n in receipt of any of	f the benefits listed	l overleaf)	
Please print carefully			_		
Parent/carer Date of Birth:		National Insurance Number OR National Asylum Seekers Support Number			
Full name of Child/C	Children:				
Surname	Forename	Child's Date of Birth	School attending or to be attended	Relationship to child (ie mum/dad/ foster carer)	
Address (including p	oost code):				
Please read the stat Local Authority Free		0 , 0	his information bei	ing accessed by the	
		on I have provided t as allowed by law to			
I .	the results of any fre receive assisted tra	•	bility check may al	lso be used to assess	
I .	•	ires that data is only eals and, assistance		•	
Signed Date:					

Important: The personal information you provide will be used for the purpose of processing this application form and will be in accordance with the principles of the Data Protection Act 1998.