FREE SCHOOL MEALS

APPLICATION FORM

Quick to apply On-Line at:
https://accountforms.camden.gov.uk/freeschoolmeals/
WWW: camden.gov.uk/freeschoolmeals

Office Use Only

RETURN FORM TO
Benefits Service **(FSM)**
P O Box 784
Redhill
RH1 9JA

Please note: For children in schools **not** in Camden you will have to apply to the borough that maintains the school or to the school itself.

Are you receiving any of the following benefits:

- Income Support
- Income-Based Job Seekers Allowance
- Income-Related Employment and Support Allowance
- Universal Credit – if you apply on or after 1 April 2018 your household income (after tax and not including any benefits you get) must be less than £7,400 a year
- National Asylum Seekers Support (NASS)
- Guarantee Element of the State Pension Credit
- Child Tax Credit Only, but not Working Tax Credit (and have an annual income that does not exceed £16,190) If you receive Working Tax Credit and **NO** other qualifying benefit other than Child Tax Credit you will **NOT** be eligible for Free School Meals.

Details of Parent/ Guardian in receipt of one of the above Benefits

Mr/Mrs/Miss/Ms/Other

Date of Birth D D M M Y Y Y Y

Surname

First name (s)

National Insurance Number or NASS Number
(This can be found on your Benefits/ Home Officer letter)

Partners Details (If applicable)

Mr/Mrs/Miss/Ms/Other

Date of Birth D D M M Y Y Y Y

Surname

First Name (s)

National Insurance Number or NASS Number
(This can be found on your Benefits/ Home Officer letter)

Current address –This must be the same as in the records held by the school. The children should live with you at this address. If they do not please explain why not and give their address on a separate piece of paper.

Post Code

Telephone Number

E-mail

Personal information that you provide is covered under the Data Protection Act 1998. Under this legislation you have the right to obtain a copy of the information we hold about you.

Details of children (Attach additional pages if necessary)

Child 1 Male ☐ Female ☐ (please tick) Your relationship to the child

Surname

First name

Date of Birth D D M M Y Y Y Y

Name of school

Child 2 Male ☐ Female ☐ (please tick) Your relationship to the child

Surname

First Name

Date of Birth D D M M Y Y Y Y

Name of school

Child 3 Male ☐ Female ☐ (please tick) Your relationship to the child

Surname

First Name

Date of Birth D D M M Y Y Y Y

Name of school

Child 4 Male ☐ Female ☐ (please tick) Your relationship to the child

Surname

First name

Date of Birth D D M M Y Y Y Y

Name of school

Once we receive your completed application for Free School Meals we will check your benefit entitlement with data held by Camden Benefits Service, Department for Work and Pensions, the Home Office and HMRC (Revenue and Customs) through a central on-line system. If we cannot confirm your entitlement through this process we will write to ask you to provide up-to-date evidence of the benefit you receive.

DECLARATION

- I understand that my entitlement to Free School Meals will continue only for as long as I receive one of the qualifying Benefits.
- I agree to inform you immediately if my benefits or tax credit entitlement changes.
- I declare that all the information I have given on this form is true to the best of my knowledge and belief.
- I hereby authorise Camden Benefits Service to check my eligibility status with the relevant providers.

Your Signature Date