APPENDIX B

APPLICATION FOR FREE SCHOOL MEALS

Please complete and return to your School together with an original proof of the relevant support payment(s) (your proof must be the official documentation that is sent from the Agency).

The relevant support payments are:-

- (1) Income Support/Employment Support Allowance (IR) (ESA(IR))
- (2) Income Based Job Seekers Allowance
- (3) Support under the Immigration & Asylum Act 1999
- (4) Child Tax Credit [(1) provided that Working Tax Credit is not included (2) and that the "annual income for Tax Credit purposes", is within the guidelines set for the financial year]
- (5) The 'Guarantee' element of State Pension Credit

| Parent/Guardian deta | ils: | | | | | | |
|--|---|--|------------------------|---|--|---|--|
| Surname | Title | First N | First Names | | | | |
| Address & Postcode | | | | Date of Birth: | | | |
| Please give details of | Feach child, includi | ng the sc | hoo | they attend: | | | |
| Full Name | ease give details of each child, including the solution with the solution with the solution in the solution with the solution in the solution | | Address | | Name of So | Name of School | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Which benefit are you in receipt of: | | | Dated from | Dated to | NI/Reference No. | | |
| Income Support/ESA (IR) | | | | | | | |
| Job Seekers | | | | | | | |
| Immigration & Asylum Act | | | | | | | |
| Child Tax Credit with "the annual income for tax credit purposes" is within this year's threshold figure (No Working Tax Credit - if unsure pass to School for assessment) | | | r | | | | |
| 'Guarantee' element of State Pension Credit | | | | | | | |
| ayments for free schoo chool lunches and will o notify the school imm | ol lunches. I agree the contact other sources nediately I cease to r | nat you wi s as allow receive or | ll use ed b have | e the information I I y law to verify my i e any changes to t | have provided to nitial, and ongoi he relevant sup | ne of the relevant suppoprocess my claim for fring, entitlement I undertaport payment (please not receive entitlement). | |
| FOR OFFICE USE ONL have checked the free | | | | original Award No | | | |
| lame | | Date | | | | to | |