

FREE SCHOOL MEALS AND PUPIL PREMIUM

We need information about you and your child so that we can provide them with the best education and support, by making sure that their school receives all the government funding to which it is entitled.

Please complete all sections of the form and return this to the school

Free Schools Meals & Pupil Premium Eligibility Criteria:

Please indicate which benefit you are currently in receipt of:

- Universal Credit with a household income of less than £7,400 a year (after tax and not including any benefits you get)
- Income-Based Jobseekers' Allowance
- Income-Related Employment and Support Allowance
- Child Tax Credit, **not entitled to Working Tax Credit** and household income less than £16,190
- Support under part VI of the Immigration and Asylum Act 1999
- Guarantee element of State Pension Credit
- Income Support
- Working Tax Credit 'run on' – the payment you receive for a further four weeks after you finish work

Applicants in receipt of the above benefits or credits may be required to enclose proof. You will be contacted should further information be needed.

Please **ONLY** complete the form overleaf if you have ticked one of the boxes above

CONTACT DETAILS FOR PUPIL ACCESS TEAM AREA EDUCATION OFFICES

NORTH AREA Lancaster, Wyre & The Fylde	SOUTH AREA Preston, South Ribble, West Lancashire & Chorley	EAST AREA Burnley, Hyndburn / Ribble Valley, Pendle, Rossendale
Area Education Office White Cross Neighbourhood Centre Quarry Road Lancaster LA1 3SE	Pupil Access Team South Room C37 County Hall Preston PR1 0LD	Area Education Office 44 Union Street Accrington BB5 1PL
(01524) 581207	(01772) 532109	01254 220747

Lancashire County Council - DfE Free School Meals Eligibility Checker

By sharing your information with us, you agree to the LA accessing the DfE Eligibility checker on your behalf.

Data Protection Act 2018 and General Data Protection Regulation 2018 (GDPR)

The Data Protection Act 2018 and GDPR are laws that are designed to protect and maintain personal identifiable information. When we are in possession of personal information we will protect it and aim to keep service user information safe, abide by the law in respect of handling personally identifiable information, and respect the wishes of service users who do not want us to share their information. Unidentifiable service user data may also be used to aid service development. Lancashire County Council holds personal data about the people/children to whom we provide services. There is more information about your rights and how the Council uses and stores data:

<http://www.lancashire.gov.uk/data-protection>. To request a copy of the information we hold about you, contact The County Council's Data Protection Officer, PO Box 78, County Hall, Preston PR1 8XJ

1. PARENT / GUARDIAN DETAILS – these should be the details relating to the person who is claiming the benefits and where the pupil resides.						
	Parent / Guardian 1			Parent / Guardian 2		
Title						
First name						
Last name						
Date of birth	DD	MM	YYYY	DD	MM	YYYY
Relationship to pupil						
National Insurance Number*						
National Asylum Support Service (NASS) Number*		/		/		
Daytime telephone number						
Email address						
	Parent / Guardian 1			Parent / Guardian 2		
Address						
	Postcode:			Postcode:		
Previous address if you have moved in the last year						
	Postcode:			Postcode:		

*Complete as appropriate

2. CHILD / CHILDREN DETAILS					
Child's last name	Child's first name	Date of birth	Male / Female	Name of school attending	Year Group

DECLARATION
The information I have given on this form is complete and accurate. I understand that my personal information is held securely and will be used only for local authority purposes. I agree to LCC checking my details with relevant Government Departments or other agencies to assess my initial and ongoing entitlement to Free School Meals, Free Travel to School and Free School Milk. I also agree to notify the local authority in writing of any change in my family's financial circumstances as set out in this form.
Signature of parent / guardian: _____
Date: _____

FOR OFFICIAL USE ONLY			
Outcome		Checked by	
Date		Household ID	