



Application Form for Free School Meals

This form should be completed in **Block Capitals** and returned to the Headteacher or, if preferred, to the Children & Young People's Services, Pupil Benefits Office. Children will only qualify for free meals if parents / guardians receive **Income Support** **Income Based Jobseeker's Allowance**, **Employment Support Allowance (Income Related)** **the Guarantee Element of Pension Credit** or **Child Tax Credit (without Working Tax Credit)** where income is less than **£15,575**. Only one form per family need be completed.

For evidence of Income Support or Income Based Jobseeker's Allowance, you can ring the Devon Benefit Delivery Centre in Plymouth on 0845 603 6095, to request they send confirmation of your entitlement. Alternately, you can send a recent letter (within 2 months of the claim) with confirmation of your entitlement to us.

If you are claiming because you are in receipt of Child Tax Credit, please provide a current copy of the Inland Revenue Credit Award Notice (form - TC602). Failure to submit evidence will mean that your application cannot be processed. We cannot guarantee to return original documents, therefore, please provide copies.

Please Note: Contributions Based Jobseeker's Allowance, Working Tax Credit and Invalidation Benefit do not qualify; also being in receipt of Child Tax Credit AND Working Tax Credit does not qualify.

Mr/Mrs/Miss/Ms: _____ Initial(s): _____ Surname: _____

Address: _____

Post Code: _____ Relationship to pupil(s): _____

1. Set out below the names, etc., of each dependent child living at the above address for whom you are applying for Free School Meals.

Forenames(s)	M/F	Surname	Date of Birth	Name of school attended	New School? Yes / No	If Yes - start date:

2. Are any of the above children known by another name? _____

3. On what date does your current free school meal entitlement end? _____

4. State type of benefit you receive: _____

5. National Insurance Number:

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Please return this form to either:
Your child's headteacher, or
The Admissions Team, 1 Capital Court, Sowton, Exeter, EX2 7LW

If you wish for Devon County Council to be able to assess your claim in future via a secure computer link with the Department of Children, Schools and Families, please complete the section below. You will need to supply your date of birth if you wish us to do this.

'I agree that Devon County Council can use the information I have provided to process my claim for free school lunches and can contact other sources as allowed by law to verify my initial, and continuing, entitlement.'

My date of birth is _____

Signed _____

FOR SCHOOL OFFICE USE - ONLY

FSMs form with evidence seen & posted / faxed* to education department (Fax no: 01392 383614): (please tick when seen)
Name of person checking evidence: _____ Signed: _____ Date: _____

To be completed by the Benefits Office:

Applicant's name: _____
(Block capitals)

National Insurance Number: _____

It is confirmed / not confirmed* that the above named client receives Income Support / Income Based Jobseeker's Allowance*.

and has done so since: _____ / _____ / _____.

and is to continue to: _____ / _____ / _____.

Official Stamp

Contact Name: _____

Telephone No.: _____

Date: _____ / _____ / _____.

**Delete as necessary*

FOR EDUCATION DEPARTMENT OFFICE USE - ONLY

Assessed: _____ No. entitled: _____

Checked: _____ From: _____ To: _____