If you do not sign the form, your application may be delayed and your child may not receive free school meals.

Declaration

I declare that the information given on this form is correct. I agree to inform Brent Council if the children change school, home address or stop receiving any of the eligible benefits. I authorise Brent Council to check the details provided with any relevant body, to check the internal council database and the DfE ECS to verify benefits.

I understand that making a false declaration is a serious matter and could render me liable to prosecution.

I agree that you will use the information I have provided to process my claim for free school lunches and will contact other sources as allowed by the law to verify my initial, and ongoing, entitlement.

Signature	
Full name	Date (DD/MM/YYYY)

We have a responsibility to protect the public funds we administer. The information you provide is held on a computer database registered in accordance with the Data Protection Act 1998 and may also be used for prevention and detection of fraud and crime. For these purposes we may also share the information with any other public sector bodies and government agencies who administer public funds under statutory requirements.



FREE SCHOOL MEALS/ PUPIL PREMIUM APPLICATION 2014/2015

Research has shown that healthy free school meals improve children's learning and productivity.

From September 2014 all children attending school in infant classes, which are Reception, Year 1 and Year 2, will be able to receive a free school meal whether their parents are in receipt of benefits or not.

If your child is in an infant class **we still need you to apply** for a free meal if you are in receipt of benefits. Your school will receive additional funding called the 'Pupil Premium' for every child registered as eligible through receiving benefits.

Children in other year groups and in secondary schools will have to apply for a free meal and the council will check your eligibility.

Schools can use the extra money for a range of activities that can help to raise attainment such as additional tuition, learning support assistants, art therapy, booster classes, educational trips and after school clubs. They continue to receive this funding for up to six years.

Even if you do not want your child to receive a free meal, don't let your school miss out on this important extra funding that will benefit your child, please fill in the form overleaf.





www.brent.gov.uk/freeschool meals



www.brent.gov.uk/freeschoolmeals

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FREE SCHOOL MEALS / PUPIL PREMIUM APPLICATION FORM 2014 / 2015

Please apply online at www.brent.gov.uk/freeschoolmeals or return this completed form to **Children's Team**, **Brent Customer Services**, **PO Box 1057**, **Wembley**, **Middlesex HA9 1HJ**. If you require any assistance in completing this form, you can email us at: school.admissions@brent.gov.uk or call us on 020 8937 3100.

You must complete all sections of the application form, including all details of each child attending a school in Brent and sign the declaration statement. We may contact you if any more information is required. Please return this form as soon as possible.

Eligibility for free school meals will not be backdated.

Details of the parent	:/guardi	ian who is r	eceiving ber	efits <u>ON</u>	<u>.Y</u>							
Title (please tick relevant box)	Mr	Mrs	Miss	Ms		Other						
Parent/guardian first name												
Parent/guardian surname												
Current family address												
address												
						Pos	stcoc	le				
	Day	Montl	n \	/ear								
Date of birth]										
Please provide your m 	obile nu	ımber and en	nail address, s	o we can	ommur	nicate v	vith <u>y</u>	you				
Landline number Mobile number												
Email address												
Department of Education National Insurance Nu or National Asylum Supp Service Reference Nun	mber ort		Service (ECS)									
Details of the benefi	ts you a	are currently	receiving									
Please tick if you are	e in receip	ot of Working	Tax Credit.									
Proof of Child Benefit	t must b	e provided if	this is your f	rst applica	tion.							
To be eligible for free	school	meals you m	ust be in rece	ipt of one	of the	followin	ng b	enefits	:			
Please tick the type	of benef	fit(s) you are cu	ırrently receivin									
Income Support Income-based Jobse	eekers Δl	lowance				Credit (ng Tax C						titled ross income
Income-related Emp			Allowance			re than		•	-:-I £-	f		lft
Support under Part Asylum Act 1999	VI of the	Immigration a	and			ifying fo					wee	ks after you
The guaranteed ele	ment of	State Pension	Credit		Iniversal	Credit						
Children who receive a compulsory school age										Childr	en u	nder the

Child(ren) details

(

Please complete one box for each child you wish to receive free school meals. If you are claiming for more than four children, please complete additional details on a separate form.

First child	
Surname	First name
Date of birth	/ Male Female
Brent school	
name	
Postcode	School attendance start date / / /
Have you previo	ously applied to Brent for free school meals? Yes No
Second child	
Surname	First name
Date of birth	/ Male Female
Brent school name	
Postcode	School attendance start date / / /
Have you previo	ously applied to Brent for free school meals? Yes No
Third child	
Surname	First name
Date of birth	/ Male Female
Brent school name	
Postcode	School attendance start date / / /
Have you previo	ously applied to Brent for free school meals? Yes No
Fourth child	
Surname	First name
Date of birth	/ Male Female
Brent school name	
Postcode	School attendance start date / / /
Have you previo	ously applied to Brent for free school meals? Yes No

Please complete the application by signing the declaration overleaf.

