

APPLICATION FOR ASSISTANCE WITH FREE SCHOOL MEALS

Did you know that you can also apply online? It's quick and easy. To find out more please visit: www.northyorks.gov.uk/freeschoolmeals

Please indicate as applicable, if this application is being submitted as a result of your chil	d moving
from another school?	

YES / NO

If yes, please indicate if your child was receiving free school meals before they left their previous

school?)	Tras receiving in	CC 30		213 DC1	iore they i	ere then previous	l	YES / NO	
Forenames of Parent/Guardian:						N	Mr/Mrs/Miss/Ms:			
Surname:					R	Relationship to pupil(s):				
Full Postal Address:										
	Postcode:				Telephone:					
Email address:										
National Insurance Number:				Date of Birth:						
Full Name of child			M/F	Date of	Birth	ı	Name of School Attending			
1.										
2.										
3.								_		
 □ Universal Credit, (provided you have an annual net earned income of no more than £7,400, as assessed by earnings from up to three of your most recent assessment periods) □ Child Tax Credit, provided you are also not entitled to Working Tax Credit and have an annual household gross income that does not exceed £16,190 (as assessed by HMRC) □ Income Support □ Income-based Jobseeker's Allowance □ Income-related Employment and Support Allowance □ Support under Part 6 of the Immigration and Asylum Act 1999 □ The guarantee element of Pension Credit □ A run-on of Working Tax Credit – paid for 4 weeks after you stop qualifying for Working Tax Credit Children who receive any of the above benefits in their own right, are also entitled to Free School Meals 										
I declare the information given on this form is accurate and that I have parental responsibility for the child/ren noted. I understand that you may check the information given on this form.										
If I move house or change my name after I make this application, I will ensure to update you.										
Signature			Date							
General Data Protection Regulation (GDPR) and the Data Protection Act 2018 – The data collected on this form will be held on file for six years. North Yorkshire Council may make enquiries about the validity of the information provided from other central and / or local government bodies. For more information on why we collect your data, the legal basis we rely on for processing your data and who we share it with, refer to the Council's Privacy Notice: www.northyorks.gov.uk/privacy-notices										

Please complete and return this form to; North Yorkshire Council, Document Management Centre, County Hall, Racecourse Lane, NORTHALLERTON, DL7 8AE. Tel: 01609 533405. Email: schoolwelfare@northyorks.gov.uk

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