

OFFICE USE ONLY

DATE RECEIVED: _____

START DATE: _____

SIGNED: _____

FREE SCHOOL MEALS APPLICATION 2014 / 2015

PERSONAL DETAILS

Person 1	Person 2
National Insurance Number <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>	National Insurance Number <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>
Title	Title
Surname	Surname
First Name(s)	First Name(s)
Date of Birth <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	Date of Birth <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>
Relationship to child	Relationship to child
Contact telephone number	Contact telephone number
Home address including postcode	

CHILD DETAILS

Full Name	Date of Birth	School (September 2014)	Gender

QUALIFYING CONDITIONS

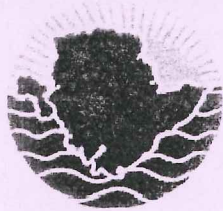
I confirm that I receive one of the following (✓) See over

- Income Support
- Jobseekers Allowance (Income Based)
- Employment and Support Allowance (income based)
- Pension Credit (Guarantee)
- Child Tax Credit, but do not receive Working Tax Credit, and your annual income (as assessed by the Inland Revenue) does not exceed £16,190 unless Working Tax Credit is part of a four week run on.
- Help under Immigration and Asylum Seekers Act 1999

DECLARATION

Anglesey County Council will use the information you provide to process and verify your claim and possible ongoing entitlement to free school meals. The results of any free school meals eligibility check may also be used to assess your entitlement to receive school uniform grant. Further information about how the Council uses personal information it collects can be obtained in the Council's Privacy Notice Statement. I certify that the information given is correct and that I'm the parent/legal guardian of the child(ren) named above.

Sign and date (Person 1)	Sign and date (Person 2)
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