

APPLICATION FOR ASSISTANCE WITH FREE SCHOOL MEALS

Please indicate as applicable, if this application is being submitted as a result of your child moving into North Yorkshire from another Local Authority

YES / NO

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

YES / NO

school	?	_						l	1207110
Forenames of Parent/Guardian:						Mr/Mrs/Miss/Ms:			
Surname:						Relationship to pupil(s):			
Full P	ostal Address:								
	Postcode:						Telephone:		
Email	address:				······································				
National Insurance Number:				Date of Birth:					
National insurance Number:				Date of Bitti.					
Full Name of child			M/F	Date of	Date of Birth		Name of School Attending		ng
1.									
2		~~~~				<u> </u>			-
3.						<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			. <u></u>
Please	indicate which benefit you	are currently in	recei	pt of:					
	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 <u>not entitled to Working Tax Credit</u> 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								
Childre	en who receive any of the above	e benefits in their	own r	ight, are als	so ent	itled to F	ree School Meals		
i unde	are the information given on the erstand that you may check the ove house or change my name	information give	n on t	his form.	•	·	•	ld/ren no	oted.
cani2	ture					Data			
Gener held of provide basis	ral Data Protection Regulation on file for six years. North York led from other central and / or we rely on for processing your northyorks.gov.uk/privacy-noti	(GDPR) and the shire County Cou local government data and who we	Data incil m : bodie	Protection nay make e es. For mo	Act 2 enquir re info	018 – Th ies abou ormation	ne data collected on t the validity of the ir on why we collect ye	this form nformatio our data	n will be on

Please complete and return this form to; The Welfare Team, CYPS, Jesmond House, 31/33 Victoria Avenue, Harrogate, HG1 5QE, Tel: 01609 533405. Email: schoolwelfare@northyorks.gov.uk