

## Free school lunch registration form

From September 2014 all children who are in Reception, Year 1 or Year 2 will be offered a free healthy school lunch. To help us plan please answer the following:

**Your child** (please complete one form for each child)

First name	Last name	Date of Birth	DD	MM	YYYY
School		Year group (from Sept 14)			
Home address					
Postcode					

Would you like your child to have a free school lunch?  Yes  No

Does your child have special dietary needs?  Yes  No

If yes, please provide a brief description, e.g. gluten free.

### Could your child's school get extra money?

Do you currently get free school meals for this child or any other children?  Yes  No

Your school may be entitled to extra funding for your child if your family joint income is less than **£16,190**.

Please complete the following information if you're happy for us to check your child's eligibility.

We will use this information to check for eligibility to claim additional grant money (the 'pupil premium') from the Government. Your details will not be used for any other purpose and will remain confidential to the Council. Your school may offer other benefits if you have eligibility – please ask for details.

### Parent/guardian details

Title	First name	Last name	Date of Birth	DD	MM	YYYY
National Insurance or NASS number			Tel			
Title	First name	Last name	Date of Birth	DD	MM	YYYY
National Insurance or NASS number			Tel			

### DWP benefits/Inland Revenue tax credits

**Which benefits/tax credits do you receive?**

	Tick box
Income support or jobseeker's allowance (income-based)	<input type="checkbox"/>
Employment support allowance (income-related)	<input type="checkbox"/>
Child tax credit only – income below threshold amount for free school meals	<input type="checkbox"/>
Guarantee element of pension credit	<input type="checkbox"/>
Support under Part VI of the Asylum Act 1999	<input type="checkbox"/>

If you receive working tax credit (regardless of income) you do not qualify for pupil premium unless you have recently stopped work or reduced your hours and are receiving the working tax credit run-on.

### Declaration

I declare that the information I have given in this form is true and complete and I undertake to inform Lewisham Council if my benefit entitlement changes.

Signature

Date

Thank you for completing this form. Please return it to your child's school as soon as possible. If you have any questions, please ask your school or call the school meals team on 020 8314 6221.

