

FREE SCHOOL MEAL – PUPIL PREMIUM

Child's Name	
Parent/Carer's Name	
Relationship to Pupil	
National Insurance Number or National Asylum Seeker Number	
Date of Birth	
Email Address	
Benefit in receipt of	
Statement	<p>I confirm that I have parental responsibility for the child(ren) named on this form.</p> <p>I agree that you can use the information I have provided to process my claim for free school meals and will contact other sources as allowed by law to verify my initial and ongoing entitlement.</p> <p>If I am assessed as eligible for free school meals, I understand that this information may also be used to assess my entitlement to school transport (if applicable).</p> <p>If I am assessed as eligible for free school meals, I understand that my eligibility will be re-checked regularly throughout the year to determine continued entitlement, and that I may be required to submit paper proof of benefit.</p> <p>I will inform you if I or my child(ren) change address.</p>
Signature	
Date	

If your child is in receipt of Universal Free School Meals but you are eligible for Pupil Premium please fill out this form and return it to the office **with proof of your eligibility**.

We will add your child to our list and be able to claim this valuable funding to support your child.