

CONFIDENTIAL FORM FM1

## APPLICATION FOR FREE SCHOOL MEALS

| APPL  | ICATION FOR FI      | APPLICATION FOR FREE SCHOOL MEALS                  |                    |      |  |  |
|---|---------------------|--|--------------------|------|--|--|
| Section 1 – Details of Parent / Guardian / Carer  |                     |  |                    |      |  |  |
| APPLICANT'S FULL NAME (Mr/Mrs/Miss/Ms)  |                     |  |                    |      |  |  |
| Relationship to child / children  |                     |  |                    |      |  |  |
| National Insurance No.  |                     |  |                    |      |  |  |
| Your Date of Birth /  |                     |  |                    |      |  |  |
| Present Address   |                     |  |                    |      |  |  |
|   |                     |  |                    |      |  |  |
| Date of taking up residence at present address / / Details of previous address  |                     |  |                    |      |  |  |
|   |                     |  |                    |      |  |  |
| Is this your first claim from DCC? YES / NO Have you applied previously under another name? YES / NO  |                     |  |                    |      |  |  |
| If yes, please state previous name(s)   |                     |  |                    |      |  |  |
| Section 2 – Children  |                     |  |                    |      |  |  |
| Children's name and surname   | Name of school or o | allaga   |                    | ۸۵۵  |  |  |
| Children's flame and surname  | Name of school of C | college  | D.O.B.             | Age  |  |  |
|   |                     |  |                    |      |  |  |
|   |                     |  |                    |      |  |  |
|   |                     |  |                    |      |  |  |
|   |                     |  |                    |      |  |  |
| £16,190). Those claiming Working Tax Credit are not eligible.  You will no longer need to provide evidence of benefits received unless you are requested to do so. The Council will undertake routine eligibility checks on all current claims throughout the year. Please contact us immediately if your benefit changes or ends, as it may mean that you no longer qualify for free school meals.  Data Protection Act  Personal information that you have provided will be used carefully and may be held on computer systems at the school/college and in the Children and Younger Adults Department. The use of this personal information is covered by registration under data protection legislation. Under the legislation you have the right to obtain a copy of the information that we hold about you. |                     |  |                    |      |  |  |
| Section 3 – <b>Declaration</b> I certify that the above information is correct to the best of my knowledge and belief, and that I am legally responsible for the children for whom I have claimed. I understand that Derbyshire County Council may verify the   |                     |  |                    |      |  |  |
| information given with Government Departments. I understand that if I fail to inform you of any change in circumstances, and my children continue to receive free meals, I may be required to repay the cost of any meals consumed.   |                     |  |                    |      |  |  |
| Signature of Claimant   |                     |  |                    |      |  |  |
| A deliberate false statement may lead to prosecution.   |                     |  |                    |      |  |  |
| FOR OFFICE USE ONLY   | -                   |  |                    |      |  |  |
| Number of Children entitled to free meals   |                     | Please return this form to the address below. If t | the form is not fu | ılly |  |  |
| completed, your application may be delayed.   |                     |  |                    |      |  |  |
| Free School Meals Office, Business Services,  |                     |  |                    |      |  |  |
| to: Children and Younger Adults Department, Derbyshire County Council, County Hall,   |                     |  |                    |      |  |  |
| Assessed by   |                     |  |                    |      |  |  |