

## FREE SCHOOL MEALS AND PUPIL PREMIUM KEY STAGE 1

We need information about you and your child, so that we can provide them with the best education and support by making sure that their school receives all the government funding to which it is entitled.

Please complete all sections of the form below and return this to the school or direct to; The Welfare Team, CYPS, Jesmond House, 31/33 Victoria Avenue, Harrogate, HG1 5QE Tel: 01609 533405  
Email: [schoolwelfare@northyorks.gov.uk](mailto:schoolwelfare@northyorks.gov.uk)

Can you confirm your annual household income is under £16,190 per year? (Please place an X in the box).

Yes

Please only complete this form if you have answered “yes” above

**1. PARENT/GUARDIAN DETAILS – these should be the details relating to the person who is claiming the benefits**

	Parent/Guardian 1	Parent/Guardian 2
Title		
First name		
Last Name		
Date of Birth	DD   MM   YYYY	DD   MM   YYYY
National Insurance Number*		
National Asylum Support Service (NASS) Number*	/ /	/ /
Daytime Telephone Number		
Mobile Number		
Email Address		
Address		
	Postcode:	Postcode:
Previous address if you have moved in the last year		
	Postcode:	Postcode

\*Complete as appropriate

**2. CHILD/CHILDREN DETAILS**

CHILD'S SURNAME	CHILD'S FIRST NAME	D.O.B	SEX	NAME OF SCHOOL ATTENDING

**3. FAMILY INCOME AND BENEFIT DETAILS**

**Please indicate which benefit you are currently in receipt 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)
- 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
- Child Tax Credit, provided you are also not entitled to Working Tax Credit and have an annual household gross income that does not exceed £16,190 (as assessed by HMRC)
- Working Tax Credit run-on – paid for 4 weeks after you stop qualifying for Working Tax Credit

**Applicants in receipt of the above benefits or credits do not need to enclose proof. You will be contacted should further information be sought.**

**DECLARATION**

The information I have given on this form is complete and accurate. I understand that my personal information is held securely and will be used only for local authority purposes. I agree to the local authority using this information to process my application for KS1 Pupil Premium funding. I also agree to notify the local authority in writing of any change in my family's financial circumstances as set out in this form.

**Signature of parent/guardian:** .....

**Date:**.....