

SECTION 2 – DECLARATION FOR FREE SCHOOL MEALS BY PARENT/GUARDIAN

You may be eligible for Free School Meals if you receive one of the following benefits (please tick the box below to indicate which benefit(s) you receive):

- Income Support
- Income Based Jobseeker's Allowance
- Income Related Employment and Support Allowance
- Support under Part VI of the Immigration and Asylum Act 1999
- The Guaranteed element of State Pension Credit
- Child Tax Credit, (provided you're not also entitled to Working Tax Credit and have an annual gross income of no more than £16,190)
- Working Tax Credit run-on - paid for 4 weeks after you stop qualifying for Working Tax Credit
- Universal Credit - if you apply on or after 1 April 2018 your household income must be less than £7400 a year (after tax and including any benefits you receive)

Please include a full copy of evidence of benefit with this application.

I confirm that the information given is correct. I agree to notify the Anglo European School immediately if my child should fail for any reason to attend the school for any reason, for any part of the year covered by the award, or if my benefit ceases. I understand that the information provided on this form may be used for the detection and prevention of fraud. I confirm that I am responsible for the child(ren) named on this form and that he/she lives / live with me.

I agree that you can use the information I have provided to process my claim for free school lunches and will contact other sources as allowed by law to verify my initial and ongoing entitlement.

I understand that it is the responsibility of the Parent/Guardian to advise the school of any change of circumstances which may affect the child(ren)'s entitlement for free school meals at any time throughout the academic year.

I understand that my application will need to be renewed at the end of the academic year and I agree to provide new evidence of benefit entitlement if I am requested to do so.

I will inform you if I change my address

Signed:

Date

SCHOOL USE ONLY
(Evidence of benefit must be enclosed with this form)
Form and evidence seen on:
Date
Name:
Signature:

School Stamp

When you have completed this form please return with a **full copy** of evidence of benefit as above to:
Mrs V G Miller, Business Manager, Anglo European School, Willow Green, Ingatestone CM4 0DJ