**PUPIL PREMIUM AND FREE SCHOOL MEALS**

**About this form**

From September 2014 all children from Year 3 to Year 13 are entitled to Free School Meals if their parent is receiving or has received any of the benefits listed on this form.

**Registering will raise money for your Chelsea Academy**

The Government will give £935 to Chelsea Academy for each child that receives Free School Meals to fund valuable support like extra tuition, additional teaching staff or after school activities. It is therefore important that anyone who may be eligible signs up for Free School Meals so that the Academy receives as much extra funding as possible. You can help us to do this by completing and returning this form.

**How the information in this form will be used**

We will use the information you provide to ask the local authority to check if you are or have been in the past 6 years eligible for any of the listed benefits. This helps to determine how much Pupil Premium money Chelsea Academy will received each year.

The information will also be used to decide whether your child(ren) are eligible for Free School Meals in the current academic year.

**Protecting your personal data**

We are committed to ensuring that the personal and sensitive information that we hold about you is protected and kept safe and secure, and we have measures in place to prevent the loss, misuse or alteration of your personal information.

Please complete the form and return it to the Chelsea Academy main Reception in a sealed envelope marked “FSM form”.

Thank you for completing this form and helping to make sure that Chelsea Academy is as well funded as possible.

**PUPIL PREMIUM AND FREE SCHOOL MEALS REGISTRATION FORM**

Your child may be entitled to Free School Meals and to enable you to claim for this, we need to confirm your eligibility. By providing us with this information, it will assist us to process your application correctly.

**ABOUT YOUR CHILD / CHILDREN**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Child’s Last Name | Child’s First Name | Child’s Date of Birth | | | Name of School |
|  |  | DD | MM | YYYY |  |
|  |  | DD | MM | YYYY |  |
|  |  | DD | MM | YYYY |  |
|  |  | DD | MM | YYYY |  |

**PARENT(S) / CARER(S) DETAILS**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Parent(s) / carer(s) 1 | | | | | | | | | | | | | | | | | | | | Parent(s) / carer(s) 2 | | | | | | | | | | | | | | | | | | | | |
| Last Name |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| First Name |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Date of Birth | DD | | | | | | MM | | | | | | YYYY | | | | | | | | DD | | | | | | MM | | | | | | | YYYY | | | | | | | |
| National Insurance Number |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | |
| National Asylum Support Service (NASS) Number |  |  | | **/** | |  | | |  | | **/** |  | |  | |  | |  | |  |  |  | | **/** | |  | | |  | | **/** |  | | |  | |  | |  | |  |
| Daytime Telephone Number |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Mobile Number |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Address | Postcode: | | | | | | | | | | | | | | | | | | | | Postcode: | | | | | | | | | | | | | | | | | | | | |

**FAMILY INCOME AND BENEFIT DETAILS**

Is your joint family income (excluding benefits) over £16,190 per year? (Please place an X in the appropriate box).

Yes No

If yes, you do **not** need to complete the next section and can go straight to the declaration at the end of the form.

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If you ticked no, please place an X in this box if you[[1]](#footnote-1) are in receipt of any of the benefits listed below:

* Income Support
* Income-based Jobseekers Allowance
* Income-related Employment and Support Allowance
* Support from NASS (National Asylum Support Service) under part 6 of the Immigration and Asylum Act 1999
* The Guarantee Element of State Pension Credit
* Child Tax Credit (with no Working Tax Credit) with an annual income of no more than £16,190
* Working Tax Credit Run-on
* Universal Credit.

Please place an X in this box if you are not sure whether your joint family income is over £16,190, or whether you are in receipt of one of the benefits listed as your child may still be eligible for free school meals:

**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 free school meals. 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.

Parent(s) / carer(s) 1 name: Parent(s) / carer(s) 2 name:

Date:

If you want your child to receive Free School Meals you must make a fresh claim each academic year. If you don’t want to claim for Free School Meals, you need to do nothing further.

1. This includes those who have parental rights for the child / children named on this form. [↑](#footnote-ref-1)