



## Free School Meal Eligibility Form

### Personal information

Title	
First name *As registered in full	
Last name *Full legal surname	

National insurance number		OR	National Asylum Support Service reference number	
Date of birth DD/MM/YYYY				
Relationship to child				

### Contact information

Email	
Telephone number (Landline)	
Telephone (mobile)	
YES/NO	I would like email to be my primary communication channel for free school meal entitlement.

### Address information

House/flat Number/Name	
Street Name	
Town/City	
Postcode	

### Child Information

First name (*As registered in full)	
Last name (*Full legal surname)	
Date of birth DD/MM/YYYY	
Gender	
YES/NO	I confirm that I have parental responsibility for the child and the child lives with me (*please circle as appropriate).

### Declaration

<p align="center"><b>I agree for Park Hall Junior Academy to process this applicant on my behalf.</b></p> <ul style="list-style-type: none"> <li>I agree that the information provided will be used to process my claim for free school meals and will contact other sources as allowed by law to verify my initial and ongoing entitlement.</li> <li>I agree that the information may be used to ensure accuracy of records across the local authority and check against fraud.</li> <li>I agree that you can inform the school(s) attended by my child of their initial and ongoing entitlement to free school meals.</li> <li>I understand that my applicant will need to be renewed at the end of the academic year.</li> </ul>	
Signed:	
Date:	