

Application for Free School Meals/School Uniform/Physical Education Clothing Allowance 2015/2016

Your completed form should be returned immediately. Free school meals and uniform grants may be delayed if this form is not returned before 31 July 2015. Applications received after this date will still be accepted.

Unsigned or incomplete forms cannot be processed and will be returned to you.

This form must be completed and signed by the person receiving benefits as stated overleaf. Application must only be made for children IN YOUR ACTUAL CUSTODY who are included in the parents'/guardians' Child Benefit or Child Tax Credit payments.

Some schools may use eligibility to free school meals as part of their Transfer Admissions Criteria

Claimant's Details

Name _____ Mr | Mrs | Ms | Miss (Please circle)

Address _____ National Insurance No

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_____ Date of Birth (of Parent/Guardian) _____

_____ Relationship to Child(ren) _____

_____ Telephone Number(s) _____

Postcode _____ Home _____

_____ Mobile _____

Previous address within the last 12 months (if different from the above):

Account Details Please give details of the bank or building society account into which you require the uniform allowance to be paid (the account must be in your name). **Payment cannot be made to Post Office accounts.**

Name of Bank/Building Society _____ Account Holder's Name(s) _____

Sort Code

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Account Number

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I do not have a bank or building society account and I understand that uniform payment will be made by a crossed cheque. Tick if applicable

If you do not have a bank or building society account, photographic ID required by Bank of Ireland (NI) to cash your cheque is a current full driving licence, valid passport, electoral card, Translink Smart Pass, student ID/registration card or EU/UK National Identity Card.

Enter the details of the child/children in your actual custody, in full-time attendance at School/College and College of Further Education, for whom free school meals/uniform allowance is/are required. Do not include students on paid training courses at Colleges of Further Education. If a child will attend an EOTAS Learning Centre, write the school and the EOTAS Centre. If waiting for results and unsure of the school write "Waiting for results" in the school/college to be attended box and contact the Meals and Uniform Section when the school is known.

All details below must be fully completed.

Surname as shown on Birth Certificate or Legal Name	Forename(s) as shown on Birth Certificate or Legal Name	Male or Female	Date of Birth	School or College to be attended full-time during school year 2015/2016	Office Use Only	
					UNF Code	Meals

If you have a child attending a College of Further Education is Physical Education part of his/her course? **Yes/No** (Please circle)

Please complete overleaf

Office Use only

Entitled Parent/Principal informed	Continued	Cancelled – Parent/Principal informed	Not Entitled Parent informed

If you are receiving one of the four benefits listed below, this section must be completed and signed by the Social Security/Employment And Support/Pension Credit office

The person stated overleaf is in receipt of:

(Please tick appropriate box)

Income Support	<input type="checkbox"/>
Income-Based Jobseeker's Allowance	<input type="checkbox"/>
Income-Related Employment and Support Allowance	<input type="checkbox"/>
Guarantee Element of State Pension Credit	<input type="checkbox"/>
<hr/>	
Above benefits are not in payment	<input type="checkbox"/>

Official stamp of verifying agency

Claimant's National Insurance Number _____

Office Manager's Signature _____

Date _____

If you receive one of the above benefits your Tax Credits Award notice (TC602) does not need to be sent to the Meals and Uniform Section.

If you are not receiving one of the above benefits please complete this section

Do you receive Child Tax Credit or Working Tax Credit and have an annual taxable income of £16,190 or less?

Yes/No (Please circle)

If 'Yes' when returning this form you must attach all pages of your Tax Credits Award notice (TC602) for year 6/4/15 to 5/4/16. If you do not receive a TC602 notice you may use your Tax Credits Annual Review notice (TC603R) for the year ended April 2015. This TC603R must state on page 1 "Check before / / ". An Annual Review notice which states on page 1 "Reply before / / " cannot be accepted.

Are you an Asylum Seeker supported by the Home Office National Asylum Support Service (NASS)? **Yes/No** (Please circle)

As parent/guardian I, the undersigned

- undertake to notify this authority if there is any change in circumstances including a change of benefits or if there is a change of address in the knowledge that if I do not do so I am liable for any loss of entitlement to free school meals or refunding this authority for any free meals taken after benefit has ceased
- undertake to refund to this authority any overpayment of money paid for school uniform on behalf of any of the children who do not attend school full-time or who do not enrol at the school or college during the 2015/2016 school year
- certify that I have not applied to any other office for a uniform allowance for 2015/2016
- certify that the child (ren) named overleaf are in my custody and the information given is correct to the best of my knowledge and belief
- understand that only one application can be made in respect of each child named
- give permission for the Social Security Agency/Employment and Support Allowance Agency/Pension Service/HMRC/NASS to provide to this authority any information necessary to deal with my application for free school meals/uniform allowance
- agree that the information provided on this form may be shared with other departments/agencies within and outside this authority for the purposes of the provision of services and the detection and prevention of crime
- understand that the information on this form is required by this authority for the purposes of processing this application. The information is covered by the provisions of the Data Protection Act 1998. My signature below is deemed to be an authorisation to allow this office to process and retain the information for the purposes stated

Claimant's Signature _____

Date _____

Completed forms should be returned to
Meals and Uniform Section,
Education Authority
Southern Region
3 Charlemont Place
The Mall, ARMAGH, BT61 9AX

Telephone (028) 3751 2200