



Early Years Application for Free School Meals

For Office Use Only			
SEEMIS Reference	Grant Type	Date Registered	Initial

Section 1 - Personal Details of Parent or Guardian

Title	First Name	Surname
National Insurance Number of legal guardian		
Full Name of Partner (if appropriate)		
National Insurance Number of partner (if appropriate)		
Full Address (including flat number if you have one)		Postcode
Email address (optional) *		Telephone Number (optional)*

* These details will be used to contact you in the event that further information is required in support of your application. If you do not wish to be contacted by email or telephone, please leave these sections blank.

Section 2 – Income and Benefits

A	Please tick this box if you receive Income Support or Jobseeker's Allowance	<input type="checkbox"/>
B	Please tick this box if you receive Working Tax Credit and your yearly income for your household (before tax) for 2015/2016 was less than £6,420 (the figure could change). Please provide a copy of your full 2016/2017 Working Tax Credit award letter with this form. We will not accept award letters showing an estimated income for 2015/2016	<input type="checkbox"/>
C	Please tick this box if you receive Universal Credit	<input type="checkbox"/>

D	Please tick this box if you receive Employment and Support Allowance	<input type="checkbox"/>
E	Please tick this box if you receive Child Tax Credit only and your yearly income for your household (before tax) for 2015/2016 was less than £16,105 (the figure could change). Please provide a copy of your full 2016/2017 Child Tax Credit award letter with this form. We will not accept award letters showing an estimated income for 2015/2016	<input type="checkbox"/>
F	Please tick this box if you are an Asylum seeker receiving support under part VI of the Immigration and Asylum Act 1999	<input type="checkbox"/>

Section 3 – List all the children you are applying for

Please list children, attending a Glasgow City Council Early Years Establishment, who you require Free School Meals for.

Surname	First Name	Date of Birth (DD/MM/YY)	Nursery

Have you submitted an application for older children for school session 2016/2017?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Section 4 – Declaration

The information I have provided is true and accurate, and I have not left anything out. You may take me to court if I have made false statements. I agree that the Department for Work and Pensions can give you information about my benefit entitlement so that my application can be processed. I understand that if free school meals are authorised and my current circumstances change, I must tell you. I will provide proof, when needed, that I currently receive the benefits to allow me to have free school meals.

Signed (legal guardian) _____

Date _____

Please post your form to:
Glasgow City Council, PO Box 29347, Glasgow G20 2BY

PLEASE NOTE: What we will do with your information

Glasgow City Council is registered under the Data Protection Act 1998. The Council is under an obligation to manage public funds properly. Accordingly information that you provide will be used to ensure all sums due to the Council are paid timeously, e.g. by identifying persons who are non-payers of Council Tax and to improve uptake of benefits. The information may also be used to prevent and detect fraud. It is also possible that this information may be shared for the same purpose with public bodies, including neighbouring Councils or other organisations which handle public funds.

The information which you provide on this form will be processed by Glasgow City Council, which is the data controller for the purposes of the Data Protection Act 1998. The personal data that you provide will be used to deal with your correspondence and to let you know what the outcome of this is. The Council will not use your personal data for any other purpose and will not disclose the personal information that you provide to any outside person or organisation except where required to do so by law or with your own consent.

Disclaimer: Plain English Campaign's Crystal Mark does not apply to this box

Do I Qualify?

Benefit	Free School Meals
Income Support or Jobseeker's Allowance	YES
Working Tax Credit and the yearly income for your household (before tax) is less than £15,050 but is £6,420 or above for the tax year 2015/2016	NO
Working Tax Credit and the yearly income for your household (before tax) is less than £6,420 for the tax year 2015/2016	YES
Housing Benefit or Council Tax Reduction	NO
Child Tax Credit only and the yearly income for your household (before tax) is less than £16,105 for tax year 2015/2016	YES
Income-related Employment and Support Allowance	YES
Universal Credit	YES

Our Service Desk at 45 John Street, Glasgow, is open from 9am to 5pm, Monday to Friday
Do not post your form to the Service Desk

For office use only (to be completed by Early Years Establishment)

I certify that the child/children listed in the application form attend the Establishment shown.

Name of the Establishment _____

Signed on behalf of the head of the Establishment _____

Position _____ Date _____

Please indicate if the child/children attend on a Full time Part time
 Full time or Part Time basis:

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IS/JSA letter <input type="checkbox"/>	Employment & Support Allowance <input type="checkbox"/>	Working Tax Credit <input type="checkbox"/>	Child Tax Credit <input type="checkbox"/>	Universal Credit <input type="checkbox"/>
Child Benefit <input type="checkbox"/>	Academy <input type="checkbox"/>	Counter <input type="checkbox"/>		
Confirmed by _____	Date _____	Authorised by _____	Date _____	

Disclaimer: Plain English Campaign's Crystal Mark only applies to the wording on this form and not the design.