

APPLICATION FOR FREE SCHOOL MEALS

Please return to:

Finance Department (M07), London Academy of Excellence Tottenham, Lilywhite House, 780 High Road, N17 0BX. This form should be returned to the school by Friday 17th September 2021. Eligibility will only be backdated to the start of the week the application was received.

PLEASE READ ALL THE INFORMATION CAREFULLY BEFORE COMPLETING THIS FORM.

Who is eliaible?

In order to be eligible the parent/carer, or the student in their own right, **MUST** be in receipt of **ONE** of the following:

- 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 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 household income must be less than £7,400 a year (after tax and not including any benefits you get)
- If from a previous school the parent was receiving Universal Credit and the student was eligible to receive free school meals, please provide a copy of previous Free School Meal entitlement letters.

How to Apply

Please complete the form overleaf using **BLOCK CAPITALS**. You should ensure that you have signed the form and post it to the address above or hand it to the School Receptionist or School Office. Unfortunately, any forms that are not signed will be returned to sender and this will lead to a delay in the Free School Meals being given.

Is Evidence of Benefit Entitlement Required?

You **MUST** provide evidence of your benefit when you submit this form. We will also check your Entitlement to a free school meal using the Department of Education's Eligibility Service (ECS) or through Haringey Council.

You must ensure, that all the details you give on this form are accurate and clearly written. Occasionally we may write to you to request certain evidence.

	efits).		
Mr/Mrs/Ms/Miss			
Full Name	First Name:		
	Surname:		
National Insurance			
Number Date of Birth			
Address			
	Postcode:		
NASS Reference (if applicable)			
(ii applicable)			
	EN FOR WHOM YOU ARE CLAIMING FRobelow, please give details of your charge free school meals.		LAE Tottenham
First Name	Surname	Date of Birth	Gender
I confirm that the ir	nformation given in this form is letails to check eligibility for fre	true and complete. I ac	•
	this information to prevent fractive this information with other d		ith public fund
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