

Pupil Premium Grant Application Form

PARENT/GUARDIAN DETAILS

	Parent/Guardian 1	Parent/Guardian 2
Last name		
First name		
Date of Birth		
National Insurance Number*		
National Asylum Support		
Service (NASS) Number*		
Daytime Telephone Number		
Mobile Number		
Address		
	Postcode:	Postcode:

*Complete as appropriate

FAMILY INCOME AND BENEFIT DETAILS

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

Yes 🛛 No 🗖

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

If you have ticked no, please place an X in the box if you 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 family income of no more that £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 above, but you would still like us to check whether your child is eligible for free school meals: \Box

DECLARATION

The information I have given on this form is complete and accurate. I understand that my personal information is held securely in line with our Privacy Policy 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.

Signature of parent/guardian:

Date: