

Free school meals application form

Please use black ink and write in block capitals.

Parent or carer details

Title:	Forename:	Surname:
Address:		Postcode:
Parent or carer's date of birth: Dd/mm/yyyy		Telephone:
Relationship to pupil:		
National Insurance Number or National Asylum Support Services Reference Number: <input type="checkbox"/>		

Child's details

Please give below the details of all children (except foster children) requiring free school meals.

Surname	Forename	Date of birth Dd/mm/yyyy	Is child male or female?	What school do they attend?

Declaration

I declare that the information I have given in this form is true to the best of my knowledge. I agree to tell Newcastle City Council's Student Services if my income changes or entitlement to any of the above benefits stops.

Signature of parent/carers:

Date:

Return this form to:

- Your child's current school,
- Any Customer Service Centre, or
- Direct to Student Services, Room 213, Civic Centre, Newcastle upon Tyne, NE1 8PU.

If you have any questions, please phone us on 0191 211 5323

For Office Use

	Name	Position	Date
Benefits confirmed by			
Application assessed by			
FSM start date		FSM finish date	