## Application for free school meals and clothing grant 2020-2021



DUE TO COVID19 ALL FIRST STOP SHOPS ARE CURRENTLY CLOSED.

Please send the completed application form to: Revenue & Benefits Support Team Dalziel Building, Ground Floor, Scott Street, Motherwell ML1 1SH or email your form to:

## fsm@northlan.gov.uk

Name of parent/carer

or office use only					

Forename	Surname
Full Address	NI no.
	tel. no.
	mobile*
postcode	email*

Children's details (including P1 - P3)

Please include all children

Please indicate what you are claiming for (✓)

Forename	Surname	D.O.B.	School and year group as at August 2020	FSM (√)	CG (√)

I am in receipt of the following benefits:

INCOME SUPPORT

JOBSEEKER'S ALLOWANCE (INCOME BASED)

EMPLOYMENT & SUPPORT ALLOWANCE (INCOME RELATED)

UNIVERSAL CREDIT (MAXIMUM MONTHLY INCOME OF £610)

CHILD TAX CREDIT WITH A GROSS ANNUAL INCOME BELOW £16,105 WITH NO ELEMENT

OF WORKING TAX CREDIT

MAXIMUM CHILD TAX CREDIT AND MAXIMUM WORKING TAX CREDIT WITH ANNUAL INCOME BELOW  $\pounds 7,330$ 

SUPPORT UNDER PART V1 OF THE IMMIGRATION AND ASYLUM ACT 1999

HOUSING BENEFIT

COUNCIL TAX REDUCTION

Bank/Building Society Account Details					
Name of Account Holder					
Name and Address of Bank/Building Society					
Sort Code (6 digits)					
Account Number (8 digits)					
Roll/Reference Number (if applicable)					

<sup>\*</sup> Providing this information will help to ensure you are advised of the outcome of your application sooner.

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 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:	Date:	(parent/carer)		
NOTICE OF CUSTOMER CONSENT				
If you qualify for 8 and/or 9 below, by signing the custom NLC to confirm your details with the benefits section.	er notice of consent below	you are agreeing to allow		
I hereby give permission to use my Housing/Council Tax Benefit details to verify my eligibility to Free School Meals and/or Clothing Grant.				
Once you have given your permission to use your Housing/Council Tax Benefit details, to verify your eligibility to Free School Meals and/or Clothing Grant, you do not have to give your permission again for any future application, unless your circumstances change, or you write to cancel your consent				
I understand that I may withdraw my consent to the disclosure of such information at any time by writing to: Revenue & Benefits Support Team, Dalziel Building, Ground Floor, Scott Street, Motherwell ML1 1SH.				
ONLY sign this declaration if you want NLC to use your information to verify your application for Free School Meals and/or Clothing Grant.				
Signed:	Date	9:		
Customer/Appointee/Legal Representative (Please dele	te as appropriate)			

## FOR FIRST STOP SHOP USE ONLY

	date	name
Date application received		
Data input to computer		
Application approved		

	proof submitted	✓	app verified (name)
1	Income Support		
2	Job Seekers Allowance (Income Based)		
3	Employment & Support Allowance (Income Related)		
4	Universal Credit (Maximum monthly income of £610)		
5	Child Tax Credit with a gross annual Income below £16,105 with no element of Working Tax Credit		
6	Maximum Child Tax Credit and Maximum Working Tax Credit. Annual Income below £7,330		
7	Support under part V1 of the Immigration and Asylum Act 1999		
8	Council Tax Reduction		
9	Housing Benefit		
10	Proof of Parentage/Legal Guardianship		