

SCHOOL UNIFORM GRANT CLAIM FORM

Please complete all sections and return to: freeschoolmeal@islington.gov.uk

Please contact the Free School Meals team if you have any queries when completing this form: freeschoolmeal@islington.gov.uk

STUDENT DETAIL

Child's Surname	Child's First Name	Date of Birth	Sex M/F	Name of School

PARENT/GUARDIAN DETAILS

Parent/guardian's surname/family name				
Parent/guardian's first name				
Parent/guardian's date of birth				
Parent/guardian's National Insurance No.				
Daytime telephone number				
Parent/guardian's current address				POSTCODE <input type="text"/>
Please provide your old address if you have moved in the last year				

SPOUSE/PARTNER DETAILS

Spouse/partner's surname (if applicable)				
Spouse/partner's first name (if applicable)				
Spouse/partner's date of birth				
Spouse/partner's National Insurance No.				

BENEFITS

Please (X) if you are in receipt of working tax credit

Please (X) The type of benefit you receive, if any:

- Income Support
 Income-based Jobseeker's Allowance
 Income-based Employment Support Allowance
 Support under Part VI of the Immigration and Asylum Act 1999
 Guaranteed element of State Pension Credit
 Child Tax Credit and joint annual gross income of no more than £16,190
 Universal Credit - your household income must be less than £7,400 a year (after tax and not including any benefits you get)
 Working Tax Credit run-on - paid for 4 weeks after you stop qualifying for Working Tax Credit

DECLARATION

The information I have given on this form is complete and accurate. Any personal information you give us is held securely and will be used only for council purposes. Information you provide us will be held in confidence and processed in-line with the Data Protection Act 2018. For more information about how we use your data, please visit: <https://www.islington.gov.uk/about-the-council/information-governance/data-protection/privacy-notice>

Signature of parent/guardian:

Date: