

# Register for Universal Infant Free School Meals now!

**All children in Reception, Year 1 and Year 2 are offered a free school meal at no cost to the parent or carer.** School meals in Enfield are healthy, tasty, social and fun and choosing a school lunch for your child will help save you up to £400 per year if you take up the offer. In Enfield this has proved popular with parents and children alike.

## Quality food, every day

Most of the school meals in Enfield primary schools are provided by Enfield Catering Services who are very proud of the food they serve and ensure that the meals your children eat are met by the high standards demanded. For further information, please visit [www2.myschoollunch.co.uk/enfield](http://www2.myschoollunch.co.uk/enfield)

## Can my child still bring a packed lunch?

Yes, they can but we would encourage them to try a school lunch. This will give them a varied and balanced diet and save you time and money. NB. A cash alternative is not available for those pupils not taking a school lunch.

## Your child may be eligible for free school meal protection up until Year 6 in primary school

On the 1 April 2018, eligibility to free school meals changed when Universal Credit was rolled out to replace existing benefits. **If you receive one of the benefits listed over the page and qualify, your child's free school meal will be protected until March 2022, even if your circumstances change.** Once Universal Credit is fully rolled out, your child will keep their free school meal until the end of their current phase of education, i.e. primary school.

## Extra funding for your child's school

It is important to sign up for free school meals, so that your child's school can claim as much funding as possible. Schools can claim additional funding from central government, known as the 'Pupil Premium' for every child whose parent or carer receive one of the benefits listed over the page. This additional money is used to ensure that children achieve academically and have full access to educational and cultural activities. However, it is for the school to decide how the money is spent. For more information, please ask at your child's school.

## To Register for free school meals, we need information about you and your child.

This will help us plan for the number of children having a school lunch, confirm if you qualify for free school meal protection and whether the school is entitled to the additional pupil premium funding. **Please complete the form overleaf and return to your child's school as soon as possible.**

## How the information on this form will be used

We are committed to ensuring that the personal and sensitive information that we hold about you is protected and kept safe and secure, and we have measures in place to prevent the loss, misuse or alteration of your personal information.

The information you provide will be used by the Council to process your application, to populate our database and ensure efficient checking and authorisation in accordance with Free School Meal legislation.

**Thank you for completing this form and helping to make sure your child's school is as well funded as possible.**

# Universal Infant Free School Meals

Please answer the following questions and return to your child's school as soon as possible. Please check the details you provide are accurate before submitting your application. If you require any assistance completing this form, please ask at your child's school. **Please complete all sections in BLOCK CAPITALS.**

**Child Details:** Please complete one form per child.

| Child's Surname  | Child's First Name | Date of Birth (DD/MM/YYYY) | Name of School |
|--|--------------------|----------------------------|----------------|
|  |                    |                            |                |
| From September 2020, which year group will your child be in? Reception <input type="checkbox"/> Year 1 <input type="checkbox"/> Year 2 <input type="checkbox"/>                              |                    |                            |                |
| Does your child have any food allergies or require any special dietary needs? Yes <input type="checkbox"/> No <input type="checkbox"/><br>If 'Yes', please provide a brief description ..... |                    |                            |                |

**Parent/Carer Details:** If two people maintain a household, details are required from **BOTH** people.

| Title  | Parent/Carer Surname | Parent/Carer First Name | Date of Birth (DD/MM/YYYY) | National Insurance Number or NASS Reference Number. |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |
|--|----------------------|-------------------------|----------------------------|---|--|--|--|--|--|--------|--|--|--|--|-----------|--|--|--|--|--|
|  |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |
|  |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |
| Address:   |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |
|  |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  | Postcode: |  |  |  |  |  |
| Telephone No.  |                      |                         |                            |   |  |  |  |  |  | Email: |  |  |  |  |           |  |  |  |  |  |
| Who has parental responsibility for the child named above, for example, Mother/Father/Carer etc.                                   |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |
| If you receive any of the benefits listed below, please place a X in the box.  |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |
| <input type="checkbox"/> Universal Credit with an annual net earned income of <b>no more than £7,400 (£616.67 per month)</b>       |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |
| <input type="checkbox"/> Income Support  |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |
| <input type="checkbox"/> Income-based Jobseeker's Allowance  |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |
| <input type="checkbox"/> Income-related Employment and Support Allowance   |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |
| <input type="checkbox"/> Support under Part 6 of the Immigration and Asylum Act 1999   |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |
| <input type="checkbox"/> The guarantee element of Pension Credit   |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |
| <input type="checkbox"/> Child Tax Credit ( <b>with no Working Tax Credit</b> ) with an annual gross income of no more than 16,190 |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |
| <input type="checkbox"/> Working Tax Credit run-on (paid for 4 weeks after you stop qualifying for working Tax Credit)             |                      |                         |                            |   |  |  |  |  |  |        |  |  |  |  |           |  |  |  |  |  |

|   |  |  |  |  |  |  |  |  |  |                |  |  |  |  |              |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|----------------|--|--|--|--|--------------|--|--|--|--|
| <b>Declaration to be signed by both Parent(s)/Carer(s) (as applicable)</b>  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |              |  |  |  |  |
| I declare that the information given on this form is complete and accurate. I agree that you will use the information provided to process my registration for free school meals and will contact other sources as allowed by law, to verify my initial and ongoing entitlement, such as the Department for Education's Eligibility Checking Service. If entitled, I agree that you can inform the school(s) attended by my child/children so that they can claim Pupil Premium funding. I agree to inform Enfield Council of any change of circumstance, such as a change of school, home address or if I stop receiving eligible benefits. |  |  |  |  |  |  |  |  |  |                |  |  |  |  |              |  |  |  |  |
| <b>Signed:</b>  |  |  |  |  |  |  |  |  |  | <b>Signed:</b> |  |  |  |  | <b>Date:</b> |  |  |  |  |
| Data collection notice: Data Protection Act 2018. In accordance with the Data Protection Act 2018 the information you have provided to Enfield Council will be used to assist with your entitlement to free school meals. The Council has a legal obligation to protect public funds. We may, therefore, share the information you have provided with other departments in the authority and with other similar bodies, for the detection and prevention of fraud.  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |              |  |  |  |  |

|            |          |          |              |                       |                    |                 |
|------------|----------|----------|--------------|-----------------------|--------------------|-----------------|
| <b>ECS</b> | <b>Y</b> | <b>N</b> | <b>Date:</b> | <b>FSM Start Date</b> | <b>Letter Sent</b> | <b>Initials</b> |
| Initials:  |          |          |              |                       |                    |                 |