

Signed:

Free School Meals

The information provided in this form is for use by the school and Liverpool City Council only.

Completing this form ensures that your child will receive their full Free School Meals entitlement.

Do you have a family income of less than £16,190			Yes	No
Do you receive any of the following?			Yes	No
W	Su orking Tax Credit run –on (Paid	Income rela upport under Part VI of th The guaran Child Tax Credit	ated Employmen ne Immigration A teed element of (and do not get	State Pension Credit Working Tax Credit)
Name of Child				
Name of Parent				
Please provide your Na Of Parent/Guardian 1				
Please provide your Na Of Parent/Guardian 1				
Please provide your As	sylum Support Number			
Please provide <u>your</u> Da	ate of Birth (Parent 1)			
Please provide <u>your</u> Da	ate of Birth (Parent 1)			
I give permission For St	Anne's Catholic Primary	School to claim fo	r Free School	Meals on my

Date: