**FSM ENTITLEMENT VERIFICATION CHECK**

SCHOOL/ACADEMY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF PUPIL(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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YEAR GROUP(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SURNAME OF PARENT/ CARER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NATIONAL INSURANCE NUMBER OF PARENT / CARER ⬜ ⬜ ⬜ ⬜ ⬜ ⬜ ⬜ ⬜ ⬜

OR ASYLUM SEEKER’S REFERENCE 9 DIGIT NUMBER ⬜ ⬜ ⬜ ⬜ ⬜ ⬜ ⬜ ⬜ ⬜

DATE OF BIRTH OF ⬜ ⬜ ⬜ ⬜ ⬜ ⬜ ⬜ ⬜

PARENT/CARER

**PLEASE TICK THE BOX APPLICABLE TO YOUR CIRCUMSTANCES;**

* I am currently **NOT** in receipt of any benefits ⬜
* Universal Credit **with an earnings threshold that does not exceed £7400** ⬜
* Income Support ⬜
* Income Based Jobseekers Allowance ⬜
* Income-related Employment and Support Allowance ⬜
* Child Tax Credit, providing you **are** not entitled to Working Tax Credit and have

an annual income, as assessed by HMRC that does not exceed £16,190 ⬜

* Guaranteed Element of State Pension Credit ⬜
* Where a parent is entitled to Working Tax Credit run-on (the payment someone

receives for a further 4 weeks after they stop qualifying for Working Tax Credit) ⬜

* Support under part VI of the Immigration and Asylum Act 1999 ⬜

I hereby give consent to a check for Free School Meals eligibility via Durham County Council’s Benefit’s Systems and the Department for Education’s online service which includes data from HMRC and DWP. Communication with Durham County Council may be subject to monitoring and recording). I understand that it is my responsibility to inform the school if I no longer receive the relevant benefit.

PARENT / CARERS SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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