



## ELECTRONIC APPLICATION FOR FREE SCHOOL MEALS

|   |  |
|---|--|
| <b>Salutation:</b>  | Mr / Mrs / Miss / Ms* <span style="float: right;">*Please indicate as appropriate</span> |
| <b>Relationship to Student:</b><br>i.e. Mother / Father etc.              |  |
| <b>Your Surname (Parent/Carer)</b>  |  |
| <b>Your First Name (Parent/Carer)</b>                                     |  |
| <b>Address</b>  |  |
| <b>Post Code</b>  |  |
| <b>National Insurance Number (this should be on your benefit details)</b> |  |
| <b>Date of Birth (Parent/Carer)</b>                                       |  |
| <b>E Mail Address:</b>  |  |
| <b>Contact Telephone Number:</b>  |  |

| Forename | Child's Surname | Child's date of birth | Name of School Child(ren) attending | Male/Female | Form group |
|----------|-----------------|-----------------------|-------------------------------------|-------------|------------|
|          |                 |                       |                                     |             |            |
|          |                 |                       |                                     |             |            |
|          |                 |                       |                                     |             |            |
|          |                 |                       |                                     |             |            |
|          |                 |                       |                                     |             |            |

If you are unable to access to the internet if you complete the form above the College can apply on your behalf.

**Signed (Parent/Carer)** \_\_\_\_\_ **Date** \_\_\_\_\_