

Please complete details below for **ALL** students that you wish to claim Free School Meals for

First Name	Legal Surname	Date of Birth	Male or Female	Relationship to child

I sign to certify that the information I have given is correct and I understand it is fraudulent to give false information.

I agree that you will use the information provided to assess my current and on-going eligibility to claim Free School Meals. I understand that my entitlement to Free School Meals will continue only for as long as I receive one of the qualifying benefits. I agree to inform the Free School Meals team **IMMEDIATELY** if my benefit or tax credit entitlement changes. I agree to provide up-to-date evidence on receipt of a review request from the Clarendon Academy.

SignedDate

Please return completed form to:

Free School Meal Application
Clarendon Academy
Frome Road
Trowbridge
Wiltshire
BA14 0DJ