**FSM ENTITLEMENT VERIFICATION CHECK**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of student:** | |  | | | | **Year group:** | | | | | | |  | | | | | | |
| **Surname of parent/carer who is in receipt of an eligible benefit:** | | | | | |  | | | | | | | | | | | | | |
| **National insurance number of parent/carer who is in receipt of an eligible benefit:** | | | | | |  |  | |  |  | |  | |  |  | |  |  | |
| **Or asylum seeker’s reference 9 digit number:** | | | | | |  |  | |  |  | |  | |  |  | |  |  | |
| **Date of birth of parent/carer:** | | | | | | **/ /** | | | | | | | | | | | | | |
| **PLEASE TICK WHICH BENEFIT YOU ARE CLAIMING** | | | | | | | | | | | | | | | | | | | |
| Universal Credit **with an earnings threshold that does not exceed £7,400** | | | | | | | | | | | | | | | | | | |  |
| Income Support | | | | | | | | | | | | | | | | | | |  |
| Income Based Jobseekers Allowance | | | | | | | | | | | | | | | | | | |  |
| Income-related Employment and Support Allowance | | | | | | | | | | | | | | | | | | |  |
| Child Tax Credit, provided 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 four 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 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/carer signature:** | | |  | | | **Date** | | | | | | |  | | | | | | |
| **HOME TO SCHOOL TRANSPORT ENTITLEMENT**  Please note a separate application must be made to the School Transport section  A national policy provides extended rights to pupils eligible for free school meals or whose parents receive their maximum level of Working Tax Credit. This provides transport for:  **Secondary** pupils:   * 1 of the 3 nearest qualifying secondary schools, where the school is more than 2 but less than 6 miles from the child’s home, and * the nearest suitable school preferred because of religion or belief for pupils whose parent(s) adhere to that particular faith, where that school is more than 2 but less than 15 miles from the child’s home. | | | | | | | | | | | | | | | | | | | |
| **For academy use only:** | | | | | | | | | | | | | | | | | | | |
| **Approved/**  **Not approved** | **Date:** | | |  | **Academic year:** | | |  | | | **Completed by:** | | | | |  | | | |
| **Approved/**  **Not approved** | **Date:** | | |  | **Academic year:** | | |  | | | **Completed by:** | | | | |  | | | |
| **Approved/**  **Not approved** | **Date:** | | |  | **Academic year:** | | |  | | | **Completed by:** | | | | |  | | | |
| **Approved/**  **Not approved** | **Date:** | | |  | **Academic year:** | | |  | | | **Completed by:** | | | | |  | | | |