

**Application form for free school meals from families with no recourse to public funds (NRPF)**

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Please complete all 4 pages of this application form if you are a family with NRPF and would like to apply for free school meals.

**Eligible groups**

These groups include, but may not be limited to children of:

* Zambrano carers
* families who have no recourse to public funds with a right to remain in the UK on grounds of private and family life under Article 8 of the European Convention on Human Rights
* families receiving support under Section 17 of the Children Act 1989 who are also subject to a no recourse to public funds restriction
* a subset of failed asylum seekers supported under Section 4 of the Immigration and Asylum Act 1999
* Chen carers
* families holding a [BN(O) passport](https://www.gov.uk/british-national-overseas-bno-visa)
* spousal visa holders
* work visa holders
* student visa holders
* those with no immigration status

**Section 1: Child’s details**

|  |  |
| --- | --- |
| Surname of child |  |
| First name(s) of child |  |
| Date of birth of child (dd/mm/yy) |  |
| Gender of Child | **Male** [ ]  **Female** [ ]  |
| Nationality of child |  |
| Address of child |  |

**Section 2: Parent /Carer’s /Partner’s details**

|  |  |  |
| --- | --- | --- |
|  | **Parent /Carer** | **Partner (if applicable)** |
| Surname of parent/carer |  |  |
| First name(s) of parent/carer |  |  |
| Date of birth (dd/mm/yy) |  |  |
| Relationship to child |  |  |
| Nationality of parent/carer |  |  |
| Address of parent/carer |  |  |
| How many children do you have? |  |  |
| Do you have recourse to Public Funds? (Can you claim benefits in the UK?) | **No** [ ]  **Yes** [ ] If no, you are not eligible for a place via this route. Please apply using the link below | **No** [ ]  **Yes** [ ] If no, you are not eligible for a place via this route. Please apply using the link below |
| Evidence of No Recourse to Public Funds | Your Biometric Residence Permits (BRP) Please scan a copy of the front and back **Or** Your Online Immigration Share Code  | Your Biometric Residence Permits (BRP) Please scan a copy of the front and back **Or** Your Online Immigration Share Code  |

**Link to apply for free school meals** <https://eyproviders.lewisham.gov.uk/SynergyWeb/Parents/default.aspx>

**Section 3: Evidence of income**

To be eligible for free school meals, your families’ annual household income must be no higher than the following:

• £22,700 for families outside of London with one child

• £26,300 for families outside of London with two or more children

• £31,200 for families within London with one child

• £34,800 for families within London with two or more children

In addition, you **cannot** have more than £16,000 in savings or investments.

This includes any wider income or support you may or your partner (if you have one) may be receiving in addition to any earnings from employment.

Please provide a document to show **this for you and your partner** – this could be a bank statement, a pay slip or an employment contract **in you and/or your partner’s name**.

|  |  |  |
| --- | --- | --- |
|  | **Parent /Carer** | **Partner (if applicable)** |
| Are you employed? | **No** [ ]  **Yes** [ ]  | **No** [ ]  **Yes** [ ]  |
| Confirm your annual NET income (after deductions/tax) |  |  |
| Please provide any of the following supporting evidence. | * Payslip
* P60
* Bank Statement
* Letter from your bank
* Letter from your employer
* Letter from your Local Authority confirming support
* Other Please specify below
 | * Payslip
* P60
* Bank Statement
* Letter from your bank
* Letter from your employer
* Letter from your Local Authority confirming support
* Other Please specify below
 |
| Other supporting evidence, please specify. |  |  |
| Are the combined household savings below £16,000? | **No** [ ]  **Yes** [ ]  |  |

|  |
| --- |
|  |

**Declaration of applicant**

I (Name) ..........................................................................................................

of (Address) ..................................................................................................................

confirm that the information I have provided above is accurate and true.

I agree that the information I have provided can be shared with the Department for Education for the purposes of assessing eligibility for a free school meal.

## Parent/Carer/Guardian with legal responsibility for care of the child

|  |  |
| --- | --- |
| * Signed
 |  |
| * Print name
 |  |
| * Date
 |  |

**Please note:** When you have completed this form, please ensure the declaration shown above is also completed. Failure to do so will mean we will be unable to process your application.

Return the form with supporting evidence to the Pupil Support Team online using our secure document upload system [www.lewisham.gov.uk/psinformation](http://www.lewisham.gov.uk/psinformation). Please use the START button on this page and upload files one at a time.