

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

Please complete this application form if you are a family with NRPF and would like to apply for free school meals. All six sections must be completed and the declaration must be signed.

1) Child's details

Surname of child	
First name(s) of child	
Date of birth of child (dd/mm/yy)	
Nationality of child	
Address of child	
School Attended	

2) Parent/carer's details

Surname of parent/carer		
First name(s) of parent/carer		
National Insurance Number		Date of birth
Relationship to child		
Nationality of parent/carer		
Address of parent/carer		
Phone number		
Email address		

3) Please tick the immigration category you are applying under

- Zambrano
- Article 8 of the ECHR
- Section 4 of the Immigration & Asylum Act 1999
- Chen
- BN(O) Passport holder (please provide a copy)
- Spousal visa holder
- Work visa holder
- Student visa holder
- Other

If you ticked "other" in the above section, please explain further here:	
Evidence of status provided:	

4) Evidence of income

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

- **If you have one child your income must be - £22,700 or less**
- **If you have two or more children your income must be - £26,300 or less**

This includes any wider income or support you may be receiving in addition to any earnings from employment. Where possible, please also provide a document to show this – this could be a bank statement, a pay slip or an employment contract.

Are you employed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have a partner? <input type="checkbox"/> Yes <input type="checkbox"/> No	are they employed? <input type="checkbox"/> Yes	<input type="checkbox"/> No
Is your annual household income, including earnings from employment and any wider support you may be receiving, less than the maximum income thresholds listed above?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

5) 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 or Warrington Borough Council for the purposes of assessing eligibility for a free school meal.

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

Signed	
Print name	
Date	

Please either post your completed form to:

Families & Wellbeing Directorate, East Annexe, Town Hall, Sankey Street, Warrington. WA1 1UH or email schooladmissions@warrington.gov.uk For further details telephone 01925 446226

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