

Heald Place Primary School

Headteacher: Hatim Kapacee Heald Place

Telephone: 0161 224 7079 Rusholme

Fax:0845 340 2417 Manchester

Email: [admin@healdplace.manchester.sch.uk](mailto:admin@healdplace.manchester.sch.uk) M14 7PN

Website: [www.healdplace.com](http://www.healdplace.com)

Dear Parents and Carers,

Did you know that if you receive certain benefits, a FREE tasty and nutritious school meal is available for your children at Heald Place Primary School? To check eligibility, simply:

Apply online at <https://www.cloudforedu.org.uk/ofsm/sims>

**OR**

The school can apply on your behalf if you are unable to. Just complete the attached declaration and return to school as soon as possible. Once a check has been made the school will write a letter to you informing you of the result.

If you receive any of the following benefits, your child can receive their school meals completely free:

* Universal Credit with an **annual ‘take home pay’** of no more than £7,400.
* Income Support
* Income-based Jobseeker’s Allowance
* Income-related Employment and Support Allowance
* Support under Part 6 of the Immigration and Asylum Act 1999
* The guarantee element of Pension Credit
* Working Tax Credit run-on (paid for the four weeks after you stop qualifying for Working Tax Credit)
* Child Tax Credit (with no Working Tax Credit) with an annual income of no more than £16,190

If you want further information then please talk to a member of the office staff or email at the address above; everything you say will be treated in the strictest confidence.

Yours sincerely,

Admin Office

**PARENT/GUARDIAN DETAILS**

|  |  |
| --- | --- |
|  | Parent/Guardian |
| Title | Mr, Mrs, Ms, Miss |
| Last name |  |
| First Name |  |
| Date of Birth | D D / M M / Y Y Y Y |
| National Insurance Number\* | \_ \_ \_ \_ \_ \_ \_ \_ \_ |
| National Asylum Support Service (NASS) Number\* | \_ \_ \_ \_ \_ \_ \_ \_ \_ |
| Daytime Telephone Number |  |
| Mobile Number |  |
| Address | Postcode: |
| Email |  |

**ABOUT YOUR CHILD/CHILDREN**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Child’s Last Name | Child’s First Name | Male/  Female | Child’s Date of Birth | | | Class |
|  |  |  | D D | M M | Y Y Y Y |  |
|  |  |  | D D | M M | Y Y Y Y |  |
|  |  |  | D D | M M | Y Y Y Y |  |
|  |  |  |  |  |  |  |

**Page 1 of 2**

**DECLARATION**

The information I have given on this form is complete and accurate. I understand that my personal information is held securely and will be used only for local authority purposes. I agree to the local authority using this information to process my application for free school meals. I also agree to notify the local authority in writing of any change in my family’s financial circumstances as set out in this form.

Signature of parent/guardian: ………………………………………………………….

Date: ……………………….

**Thank you for completing this form.**

**How the information in this form will be used**

The information you provide in this form will be used by the council to confirm receipt of one of the listed welfare benefits. Once this is confirmed, this helps to decide how much money your child’s school will receive each year.

The information will also be used in relation to pupils in year 3 or above to decide whether they are eligible for free school meals.

You only need to complete this form once and it will last for the duration of your child’s time at their current school. You should contact the school or local authority if you have a change in financial circumstances.

We are committed to ensuring that the personal and sensitive information that we hold about you is protected and kept safe and secure, and we have measures in place to prevent the loss, misuse or alteration of your personal information. We will use the information you provide to assess entitlement to free school meals. The information may also be shared with other Council departments to offer benefits and services.

**Page 2 of 2**