



6 Are you in receipt of:

<b>Income Support</b>	<input type="checkbox"/>
<b>Income Based Job Seekers Allowance</b>	<input type="checkbox"/>
<b>Income Related Employment and Support Allowance</b>	<input type="checkbox"/>
<b>Guarantee Element of State Pension Credit</b>	<input type="checkbox"/>
<b>Child Tax Credit with no Working Tax Credit</b>	<input type="checkbox"/>
<b>Support under Part 1V of the Immigration &amp; Asylum Act 1999</b>	<input type="checkbox"/>

**PLEASE NOTE**

1. **BARNSELY MBC HAS THE FACILITY TO CHECK BENEFIT ENTILEMENT. THIS MEANS THAT YOU DO NOT NEED TO SEND PROOF AT THIS STAGE HOWEVER, IF WE ARE UNABLE TO ESTABLISH YOUR ENTITLEMENT WE MAY REQUEST DOCUMENTRY EVIDENCE.**
2. **YOU WILL NOT QUALIFY IF YOU ARE IN RECEIPT OF WORKING TAX CREDITS.**
3. **YOU WILL BE CHARGED FOR ALL MEALS TAKEN PRIOR TO RECEIPT OF THIS FORM.**

7 I certify that the information given by me regarding income/benefits is correct to the best of my knowledge and belief and I undertake to notify Scheme of Aid immediately of any change in circumstances set out therein. I understand that Scheme of Aid may check or share with other agencies the income/benefit I have declared.

8 Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

9 Completed Forms and Documentary Evidence should be returned to:

**Barnsley MBC  
Directorate for Children, Young People and Families  
Free School Meals  
Corporate Mail Room  
PO Box 634  
BARNSELY  
S70 9GG**

**FOR OFFICE USE ONLY**

From: \_\_\_\_\_

Assessed by: \_\_\_\_\_ Date: \_\_\_\_\_

Checked by: \_\_\_\_\_ Date: \_\_\_\_\_