New Application - Free School Meals - School Clothing Grant - Academic Year 2023/2024

Name of Pa	arent or G	uardian (Blo	ck Letters)								
Title	First Name			Surname	e						
Address											
				Postcode							
Email											
Telephone	National In	isurance	Number								
Date of birth											
Name of Pa	National Insurance Number										
List of all ch		(D	School Attende	d							
First Name Surname					Day	Month	Year	(from August 20	023)		
l am in re	ceipt of:										
Income su					Yes	No					
Support ur	nder Part	VI of the Imr	migration and Asylum Act 1999	9				Yes	No		
Any income related element of Employment and Support Allowance								Yes	No		

Job Seeker's Allowance (Income Based)

Child Tax Credit, but not Working Tax Credit, with an income of less than £18,725 Child Tax Credit and Working Tax Credit (with an annual income under £8,717 Universal Credit with a monthly earned income of not more than £726

Does your child have a Co-ordinated Support Plan?

I declare that the information provided by me is a true and accurate statement of my circumstances and that I have not withheld any fact. In the event of my circumstances changing, I hereby undertake to notify you. I acknowledge that false statements made may result in proceedings in Court. Applications are processed by the Council's Benefit Section. By signing below I consent to allow information held in relation to any Housing Benefit/Council Tax Reduction Claim to be checked to determine eligibility.

Yes

No

Signed (parent or guardian)	Date	

Please tick if you do not have a B	ank Account
---	-------------

All payments for Clothing Grants are paid directly to your bank account. Please complete and return to us either by post to Benefits Section, PO Box 9089, Dumfries, DG1 9EB, by email to EducationBenefits@dumgal.gov.uk, or in person to your nearest Customer Service Centre.

Further information relating to Free Meals and Clothing Grants is available at www.dumgal.gov.uk/schoolmeals

(You must sign and date your application or it will be returned to you for further completion).

Please turn over



Yes

Yes

Yes

Yes

No

No

No

No

Chief Executive Service - Purchase Ledger Team

Method of Payment Form Clothing Grant Application

	Claim Re	eference I	Number									Office use
Please complete this section then one of Sections A or B below , depending on the method of payment required. To avoid any delay in payment please ensure this form is returned with your application for a Clothing grant to: Benefits Section, PO Box 9089, Dumfries, DG1 9EB, or via email to: EducationBenefits@ dumgal.gov.uk												
Name (Bloc	k Caps)											
E-mail Address				Contact Tel No								
National Ins	surance i	number										
I authorise payment into my account details below												
Signature										Dat	e	
A. Payment Into Your Bank Account												
Name and Address of Bank												
Bank Sort C	ode (6 d	igits)										
Bank Accou	int Numb	per (8 digi	ts)									

B. Payment Into Your Building Society Account

Please arrange for this section to be completed by your Building Society and have the form stamped by them as evidence that the details are correct. N.B. Some Building Societies are not full members of the clearing system and although payment will be transmitted to the Building Society's account, there may be a delay in them crediting your account. If you do encounter delays you should contact the Building Society concerned.

Building Society Bank Sort Code	Building Society Name and Addres	s Stamp					
Building Society Bank Account Number							
Building Society Bank Account Roll Number							



0007-19