Department for Education

Application form for free school meals from 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.

To complete this form, applicants should complete all sections.

When completed, please ensure the declaration at the end of the application is also signed.

Further information relating to this extension can be found in the free school meals guidance for schools and local authorities.

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	

Parent/carer's details

Surname of parent/carer	
First name(s) of parent/carer	
Relationship to child	
Nationality of parent/carer	
Address of parent/carer	

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Please tick the immigration category you are applying under. (If applying electronically, please highlight the appropriate option).

- ☐ Zambrano
- ☐ Article 8 of the ECHR
- ☐ Section 4 of the Immigration & Asylum Act 1999
- ☐ Chen
- ☐ BN(O) Passport holder
- ☐ 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:	

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

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?	
If you have a partner, are they employed?	
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?	

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	

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