

Pupil Development Grant For Academic Year 2020/2021

Please complete the form **in full** and send it back to FSMA@cardiff.gov.uk by **30.06.2021**

Any queries regarding it please email Freeschoolmeals@cardiff.gov.uk

Please complete one form per child

Your details

Full Name:

Date of Birth:

National Insurance Number:-

Are you an asylum seeker (please delete as applicable): Yes / No

If Yes, please provide your NASS number:-

Address:

Phone Number:

E-mail Address:

Your Child's Details

Child Name:

Date of Birth:

Name of School:

Gender:

Child's Relationship to You:

Payments will be made by a BACS payment directly into your bank account, therefore please enter the following details:

| Full name | Sort code | Account number | Roll Number (if Building society) |
|-----------|-----------|----------------|-----------------------------------|
| | | | |

Payments **cannot** be made into Post Office accounts. If you do not have a bank account we can send your payment by cheque, but the cheque can only be made payable to the person claiming for the child.

Please put a Y in the box if you would also like to claim Free School Meals

Declaration

Please read this declaration carefully before you submit this application.

- I understand that this claim is made to you, Cardiff Council and that you are able to process my personal data as you have a legal requirement to do so
- I declare that the information I have given on this form is correct and complete as far as I know and believe.
- I understand that if I knowingly give information that is incorrect or incomplete, I may be liable to prosecution or other action.
- I understand that you will collect, store and use the information I have provided to process my claim for a Pupil Development Grant, to contact me about other services I may be entitled to; and to prevent fraud.
- I agree you may check some of the information with other sources such as the Department of Work and Pensions or other Council Departments (This list is not exhaustive)
- I understand that you may use any information I have provided in connection with this and any other claim for social security benefits that I have made or may make. You may give some information to other organisations, such as government departments, local authorities and private sector companies such as banks and organisations that may lend me money, should the law allow this.
- I know that I must let you know in writing straight away about any change in my circumstances which might affect my claim.

Confirmation

Signature:

Date: