

# Haydock High School

Clipsley Lane | Haydock | St. Helens | Merseyside | WA11 0JG Telephone: 01744 678833 | Fax: 01744 678832

> Email: enquiries@haydockhigh.sthelens.org.uk www.haydockhigh.org.uk

Ref: DH

8<sup>th</sup> November 2017

#### Dear Parents/Carers

Did you know that the school receives Pupil Premium funding for every student who is registered for Free School Meals? Registering for Free School Meals not only allows your child access to a free meal every day but also ensures the school receives additional funding which we can use to benefit our students.

If you receive <u>any of the following benefits</u> and are <u>not</u> already registered for Free School Meals, then you are likely to qualify.

- Income Support
- Income-based Jobseekers Allowance
- Income-related Employment and Support Allowance
- Support from NASS (National Asylum Support Service) under part 6 of the
- Immigration and Asylum Act 1999
- the guarantee element of State Pension Credit
- Child Tax Credit (with no Working Tax Credit) Working Tax Credit run-on
- Universal Credit.

If you think you may qualify and have not already registered, then can you please complete the form below and return a copy to the school. We will be sending copies of the form home with students this week. If your child does not bring a form home and you would like to apply just email the school office on <a href="info@haydockhigh.sthelens.org.uk">info@haydockhigh.sthelens.org.uk</a> and we will send a form to you in the post.

If you think you may be eligible and have not yet applied, completing these forms will help ensure the school receives the maximum possible Pupil Premium funding which we can use to benefit our students. Thank you for your time, if you have any queries please contact the school by email or on 01744 678833.

Yours Sincerely

Miss D Harrison

Headteacher: Mr I. Murphy, M.A.

School Business Manager

## **ST HELENS COUNCIL**

## **REGISTRATION FORM**

#### FREE SCHOOL MEALS AND PUPIL PREMIUM



We need information about you and your child, so that we can provide them with the best education and support by making sure that school receives all the government funding to which it is entitled. Please complete this form and return to school immediately.

# **ABOUT YOUR CHILD/CHILDREN**

Child's Last Name	Child's First Name	Child's Date of Birth			Name of School
		DD	MM	$\forall \forall \forall \forall \forall$	
		DD	MM	AAAA	
		DD	MM	AAAA	
		DD	MM	AAAA	

#### **PARENT/GUARDIAN DETAILS**

	Parent/Guardian 1			Parent/Guardian 2		
Last name						
First Name						
Date of Birth	DD	MM	$\forall \forall \forall \forall \forall$	DD	MM	$\forall \forall \forall \forall \forall$
National Insurance Number*						
National Asylum Support Service (NASS) Number*	/	/		/	/	
Daytime Telephone Number						
Mobile Number						
Address	Postcod	e:		Postcode	·:	

PLEASE COMPLETE BOTH SIDES OF THIS FORM

<sup>\*</sup> Complete as appropriate



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#### **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 that you may use the information I provide to process my request for free school meals and will contact St Helens Council who will liaise with the DWP to verify my entitlement. 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:		Date:
Parent/G	uardian	

You are free to withdraw your consent at any time so that your details are not used in the future. Whether you provide your details or not will not affect any of the welfare benefits that you may be entitled to.

<sup>&</sup>lt;sup>1</sup> This includes those who have parental rights for the child/children named on this form.