

Pupil Premium Registration form

Please complete all sections and return this form to your school or Revenues & Benefits, PO Box 187, Ellesmere Port, CH34 9DB

1) Please enter details regarding ALL your children that you wish to claim for							
	-						
Forename(s)	Surname	M/F	Date of Birth	Name of School Currently Attending			
2) Details of parent/guardian (all fields must be completed)							
	Forename(s)	Forename(s) Surname	Forename(s) Surname M/F	Forename(s) Surname M/F Date of Birth			

Surname: ______ Forename(s): ______ Title: ______ Address: ______ Postcode: ______ Telephone No: ______ Relationship to child/children: _____ National Insurance Number: _____ Email Address _____ Date of Birth: ___/___ 3) Details of the qualifying benefit(s) you receive

Income Support		Employment & Support Allowance (income related)	
		(Income Related)	
Job Seekers Allowance (Income Based)		Child Tax Credits and my annual taxable	
		income is under £16,190	
Pension Credit (must include Guarantee Credit)		Universal Credit Provided you have an annual net earned income of no more than £7,400	

You <u>cannot</u> get Free School Meals if you are in receipt of Working Tax Credit, or receive an allowance for fostering a child or receive Universal Credit with an annual net earned income of £7,400.

4) Declaration

I certify that the information given is, to the best of my knowledge, correct



Signature _____ Date _____

Cheshire West and Chester

