

Borden Grammar School



2023/24 Supplementary Information Form Free School Meals or Pupil Premium

PART A

In order to understand the application process and by what date forms must be completed, please read the School Admissions Policy 2023-24 and your Local Authority booklet before completing this form.

You should only complete this form if:

1. You have named Borden Grammar School on the Common Application Form
2. Your son is in receipt of Free School Meals (FSM) or Pupil Premium (PP)

You must complete **Part A** of this form and will need to take it to your son's current school in order for them to complete **Part B**.

You then need to return the completed form to **The Admissions Officer, Borden Grammar School, Avenue of Remembrance, Sittingbourne, Kent ME10 4DB** by 31st October 2022. Forms received after that date will be treated as late applications.

You must also complete the Secondary Common Application Form.

STUDENT DETAILS

Forename: _____	Home address: _____
Middle name: _____	_____
Surname: _____	_____ Postcode _____
Date of birth: _____	Name of current school attending: _____

DETAILS BELOW OF THOSE WITH PARENTAL RESPONSIBILITY: *(please give full names of parents or legal guardians. If parents do not live together, it would be helpful to have both addresses, including postcodes)*

Name: _____	Name: _____
Address: _____	Address: _____
_____ Postcode _____	_____ Postcode _____
Mobile No: _____	Mobile No: _____
Email: _____	Email: _____

Please read the following declaration carefully and then sign and return the forms as described above. I confirm that the information I have supplied is true and accurate and I consent to you using the information provided to check my claim for FSM or PP by contacting other sources as allowed by law to verify my entitlement, including the Benefits Agency and that the submission of incorrect information may result in legal action

Signed: _____

Date: _____

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PART B

To be completed by the student's current school

Student's full name:	
Date of birth:	
Student's UPN:	
I confirm that the student named above is currently in receipt of free school meals	Yes No
I confirm that the student named above is currently in receipt of pupil premium	Yes No
Name of school currently attending:	
Name of person completing this form:	
Position held in school:	
Email address:	
Signature:	
Date:	
Telephone Number:	
School Stamp	

Data Protection: All information supplied will be processed and held by Borden Grammar School in accordance with our Data Protection Policy and Privacy Notices which are available to view on the school website. Information may be shared with other relevant admission authorities and Government Departments where there is a Legal requirement to do so or for the purpose of validating the child's entitlement to FSM or PP