



Early Years Pupil Premium and Infant Pupil Premium Checker Form

(This form is only for parent / carer's of children in Nursery, Reception, Year 1 and Year 2 classes.
For children in Year 3 and above, please visit Bristol City Council's Free School Meals webpage)

Please PRINT the information below clearly, as incorrect information cannot be checked.

- I give my permission for my child's school / academy to use the information I have provided to check my details against the Pupil Premium / Free School Meals eligibility checker.
- I give my permission for the school / academy to re-check my information from the date I have signed this form until my child leaves Year 2.
- I declare that I have parental responsibility for the child named on this form.

| | |
|--|--|
| Child's Surname | |
| Child's First Name | |
| Child's Date of Birth (DD/MM/YYYY) | |
| Parent / Carer's Surname | |
| Parent / Carer's Date of Birth (DD/MM/YYYY) | |
| Parent / Carer's National Insurance Number (AA 12 34 56 C) or Asylum Seeker Number (123456789) | |

| | |
|----------------------------|------|
| Parent / Carer's Signature | Date |
|----------------------------|------|

Thank you for completing this form. Please return it the main school / academy office.

School / Academy Office Use Only

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|------------------------------|--------|----|-----------|-----|-----|
| Child's UPN | | | | | |
| Child's Year Group | N1 | N2 | R | Yr1 | Yr2 |
| Outcome of LA Database check | Passed | | Not found | | |