

**Northumberland County Council
Free School Meals
Notification of Pupil Amendment**

PUPIL/DETAILS	
FSM Ref: (Guardian Surname)	
Names	1
	2
	3
Date of Birth	
Address	
Postcode	
Telephone No	

Please tick where appropriate

- ☐ Family have changed address to _____

- ☐ Transferred to another school Date of Transfer _____
Name of School _____
- ☐ Parent now working
- ☐ No longer receiving qualifying benefit
- ☐ Taking packed lunch
- ☐ Left the area
- ☐ Child no longer living with claimant
- ☐ Child left school
- ☐ Other reason, please specify _____

Signature of School Secretary _____

Date _____ Name of School _____