

School Meals Local Projects Scheme

Academic Year 2018/2019



The School Meals Programme funding is to meet the food costs of groups currently operating school meals projects. Priority for funding is currently given to schools which are part of the Department of Education & Skills' initiative for disadvantaged schools, 'Delivering Equality of Opportunity in Schools' (DEIS). Funding is provided for "food items" only to projects that are up and running and benefiting disadvantaged students or children with special needs.

The person named in Question 2 must sign the form. The treasurer/school board of management member/person responsible for finance in the organisation should co-sign the application.

You must answer ALL Questions

1. Please state:

School Meals Identifier/Roll Number:
Name:
Address:
Postcode:
Tax Reference Number:

2. Name of person applying for Grant:

Name:	
Position held:	
Phone Number:	No. of School(s) Involved:
Email Address:	

3. Name, address, roll number(s) of the school(s) and the number of children enrolled:

(Please note that in the case of schools, pupil numbers for which funding is to be provided for under the scheme will be limited to the previous year's enrolment figures.)

School:	Address:	Roll Number:	No. of Children Enrolled:

4. **Have you ever previously received funding from this Department for a food club?** Yes No

If 'YES', a completed Income and Expenditure Report must be submitted, plus one month's worth of receipts. Report form is available at www.welfare.ie.

5. **Does the school(s) benefit from the Urban School Meals Scheme operated by the Local Authorities** Yes No

If 'Yes', please give details.

You must answer all of Question 6 if you are operating a Pre-School.

6. (a) **When was the organisation founded?**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
M	M	Y	Y	Y	Y

- (b) **The status of the group for example Charitable status etc. and reference number?**

- (c) **Is your organisation a community based project?** Yes No

- (d) **The age group of the children attending the Pre-School? (Please refer to the school meals criteria regarding condition on age (2.5+ years)).**

- (e) **Have you notified the Health Service Executive that your premises are in operation?** Yes No

- (f) **Has the Health Service Executive inspected and passed your premises for Health and Safety Regulations?** Yes No

Please ensure that a separate copy of this page is completed in respect of each food club. Multi School Organisations (including School Completion Programmes) should provide a breakdown of the number of pupils, by school, participating in each food club on a separate sheet of paper.

7. Type of food club for which funding is requested.

- (a) What **type** of club do you operate?
- Breakfast Club
 - Lunch Club
 - Dinner Club
 - Snack Club
 - Afterschool Club

Note: The Healthy Ireland Nutrition Standards for School Meals must be implemented for the 2018/2019 year.

What food items are being provided?

(b) How are the children selected?

(c) Main Supplier of food?

8. Are you operating a canteen? Yes No

9. Details of the food club for which funding is requested.

a) The average number of children who participate in the club on a **daily** basis?

b) How many days per week does the club operate?

c) How many weeks will the club operate in the current school year?

d) What is the actual period that this club will cover? (start date and finish date for the current school year)

Start date: **20**

Finish date: **20**

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e) Total amount required for this food club for the 2018/2019 academic year?

Note: Funding may be capped at this figure.

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Signature (not block letters)

Date: **20**

D D M M Y Y Y Y

Co-signature (not block letters)

Date: **20**

D D M M Y Y Y Y

Payment Details

School Meals Identifier/Roll Number: _____

You should provide the following information to enable the Department to lodge funds by Electronic Fund Transfer (EFT). Note: A personal bank account is not acceptable.

A separate bank account for school meals funding must be operated for all organisations where payments received under the Scheme exceed €10,000.

You will get the following details printed on statements from your financial institution.

Name of financial institution:

Bank Identifier Code (BIC):

International Bank Account Number (IBAN):

Name of account (as per bank statement):

Names of individuals who have authority to withdraw funds from this account:

Name 1:

Name 2 (if any):

Is this a separate school meals bank account used exclusively for school meals? Yes No

This completed Form and the Income and Expenditure Report should be sent to:

School Meals Programme, Department of Employment Affairs & Social Protection, College Road, Sligo. Telephone contacts: (071) 91 38625 and (071) 91 38626

Declaration (this must be signed by the person named in question 2)

We declare that the information given by us on this form is truthful and complete. We understand that if any of the information we provide is untrue or misleading or if we fail to disclose any relevant information, that we will be required to repay any payment we receive from the Department and that we may be prosecuted. We declare that we are operating within the criteria of the scheme and we undertake to immediately advise the Department of any change in circumstances which may affect the school's/organisation's entitlement.

Signature (not block letters)

Position held by me

Date:
D D M M Y Y Y Y

Co-signature: Treasurer/Board of Management Member/
person responsible for finance in the
organisation (not block letters)

Position held by me

Date:
D D M M Y Y Y Y

Warning: If you make a false statement or withhold information, you may be prosecuted leading to a fine, a prison term or both.

Checklist

Applications must be submitted no later than 21 September 2018.

Have you?

Application Form (SMLPS 1)

- Enclosed a separate copy of page 3 (questions 7, 8 & 9) that has been completed and signed in respect of each food club being applied for?**
- Made sure that the form is signed and countersigned?**
- Provided a breakdown of the number of pupils and the amount of funding sought, by school or preschool taking part in each food club on a separate sheet of paper attached to page 3 (Multi School Organisation including School Completion Programme ONLY).**
- Completed Question 6 (Preschools only).**

Income & Expenditure Report (SMLPS 2)

- Enclosed a fully completed Income & Expenditure (SMLPS 2) form in respect of the 2017/2018 academic year which must be submitted with your application.**
- Declared in Part 2 any payment received from other sources for the food club(s).**
- Enclosed one month's worth of detailed invoices/receipts for October 2017, showing food items purchased under the scheme.**
- Provided details of any surplus or deficit balance at the end of school year that has been recorded in Part 4. If a deficit occurs, please state how this has been funded.**
- Made sure that the SMLPS 2 form has been signed and counter signed.**

For more information, please visit www.welfare.ie.

Data Protection Statement

Personal data is required to determine eligibility for payments and services, administered for Ireland's social protection system. It may be shared with other Government Departments/Agencies where provided for by law. Data protection policy available at www.welfare.ie/dataprotection or hard copy.

Explanations and terms used in this form are intended as a guide only and are not a legal interpretation.