Dear Parent/Guardian:

Children need healthy meals to learn. [Name of School/School District] offers healthy meals every school day. Breakfast costs [\$]; lunch costs [\$]. Your children may qualify for free meals or for reduced price meals. Reduced price is [\$] for breakfast and [\$] for lunch. This packet includes an application for free or reduced price meal benefits and a set of detailed instructions. Below are some common questions and answers to help you with the application process.

- 1. WHO CAN GET FREE OR REDUCED PRICE MEALS?
  - All children in households receiving benefits from **SNAP** or **TANF** are eligible for free meals.
  - Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals.
  - Children participating in their school's Head Start program are eligible for free meals.
  - Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
  - Children may receive free or reduced price meals if your household's income is within the limits on the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced price meals if your household income falls at or below the limits on this chart.

FEDERAL ELIGIBILI	FEDERAL ELIGIBILITY INCOME CHART FOR School Year 2021									
Household size	Annual	Monthly	Weekly							
1	23,606	1,968	454							
2	31,894	2,658	614							
3	40,182	3,349	773							
4	48,470	4,040	933							
5	56,758	4,730	1,092							
6	65,046	5,421	1,251							
7	73,334	6,112	1,411							
8	81,622	6,802	1,570							
	+8,288	+691	. 100							
Each Additional Person	+ 8,288	+ 691	+160							

2. HOW DO I KNOW IF MY CHILDREN QUALIFY AS HOMELESS, MIGRANT, OR RUNAWAY? Do the members of your household lack a permanent address? Are you staying together in a shelter, hotel, or other temporary housing arrangement? Does your family relocate on a seasonal basis? Are any children living with you who have chosen to

leave their prior family or household? If you believe children in your household meet these descriptions and haven't been told your children will get free meals, please call or e-mail [school, homeless liaison, or migrant coordinator].

- 3. Do I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD? No. Use one Free and Reduced Price School Meals Application for all students in your household. We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to: [name, address, phone number].
- 4. SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE MEALS? No, but please read the letter you got carefully and follow the instructions. If any children in your household were missing from your eligibility notification, contact [name, address, phone number, e-mail] immediately.

- 5. CAN I APPLY ONLINE? Yes! You are encouraged to complete an online application instead of a paper application if you are able. The online application has the same requirements and will ask you for the same information as the paper application. Visit [website] to begin or to learn more about the online application process. Contact [name, address, phone number, e-mail] if you have any questions about the online application.
- 6. MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT A NEW ONE? Yes. Your child's application is only good for that school year and for the first few days of this school year, through [date]. You must send in a new application unless the school told you that your child is eligible for the new school year. If you do not send in a new application that is approved by the school or you have not been notified that your child is eligible for free meals, your child will be charged the full price for meals.
- 7. I GET WIC. CAN MY CHILDREN GET FREE MEALS? Children in households participating in WIC may be eligible for free or reduced price meals. Please send in an application.
- 8. WILL THE INFORMATION I GIVE BE CHECKED? Yes. We may also ask you to send written proof of the household income you report.
- **9.** IF I DON'T QUALIFY NOW, MAY I APPLY LATER? Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and reduced price meals if the household income drops below the income limit.
- **10.** What IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION? You should talk to school officials. You also may ask for a hearing by calling or writing to: [name, address, phone number, e-mail].
- **11.** MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN? Yes. You, your children, or other household members do not have to be U.S. citizens to apply for free or reduced price meals.
- 12. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you <u>normally</u> receive. For example, if you normally make \$1,000 each month, but you missed some work last month and only made \$900, put down that you made \$1,000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
- 13. WHAT IF SOME HOUSEHOLD MEMBERS HAVE NO INCOME TO REPORT? Household members may not receive some types of income we ask you to report on the application or may not receive income at all. Whenever this happens, please write a 0 in the field. However, if any income fields are left empty or blank, those will also be counted as zeroes. Please be careful when leaving income fields blank as we will assume you <u>meant</u> to do so.
- 14. WE ARE IN THE MILITARY. DO WE REPORT OUR INCOME DIFFERENTLY? Your basic pay and cash bonuses must be reported as income. If you get any cash value allowances for off-base housing, food, or clothing, it must also be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. Any additional combat pay resulting from deployment is also excluded from income.
- 15. WHAT IF THERE ISN'T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY? List any additional household members on a separate piece of paper, and attach it to your application. Contact [name, address, phone number, e-mail] to receive a second application.
- 16. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for SNAP or other assistance benefits, contact your local assistance office or call 1-877-423-4746.

If you have other questions or need help, call (insert number).

Sincerely,

[signature]

# HOW TO APPLY FOR FREE AND REDUCED PRICE SCHOOL MEALS FOR 2020-2021

Please use these instructions to help you fill out the application for free or reduced price school meals. You only need to submit one application per household, even if your children attend more than one school in [School District]. The application must be filled out completely to certify your children for free or reduced price school meals. Please follow these instructions in order! Each step of the instructions is the same as the steps on your application. If at any time you are not sure what to do next, please contact [School/school district contact here; phone and email preferred].

# STEP 1: LIST ALL HOUSEHOLD MEMBERS WHO ARE INFANTS, CHILDREN, AND STUDENTS UP TO AND

Tell us how many infants, children, and school students live in your household. They do NOT have to be related to you to be a part of your household.

- Who should I list here? When filling out this section, please include ALL members in your household who are:
- Children age 18 or under AND are supported with the household's income;
- In your care under a foster arrangement, or qualify as homeless, migrant, or runaway youth;
- Students attending [school/school system here], regardless of age.

A) List each child's name. Print each child's name. Use one line of the application for each child. When printing names, write one letter in each box. Stop if you run out of space. If there are more children present than lines on the application, attach a second piece of paper with all required information for the additional children.	B) Is the child a student at [name of school/school system here]? Mark "Yes" or "No" under the column titled "Student" to tell us which children attend [name of school/school district here]. If you marked "Yes", write the grade level of the student in the "Grade" column to the right.	C) Do you have any foster children? If any children listed are foster children, mark the "Foster Child" box next to the child's name. If you are ONLY applying for foster children, after finishing STEP 1, go to STEP 4. Foster children who live with you may count as members of your household and should be listed on your application. If you are applying for both foster and non-foster children, go to step 3.	li r t <u>a</u>
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### PLEASE USE A PEN (NOT A PENCIL) WHEN FILLING OUT THE APPLICATION AND DO YOUR BEST TO PRINT CLEARLY.

## STEP 2: DO ANY HOUSEHOLD MEMBERS CURRENTLY PARTICIPATE IN SNAP, TANF, OR FDPIR?

If anyone in your household (including you) currently participates in one or more of the assistance programs listed below, your children are eligible fo

- The Supplemental Nutrition Assistance Program (SNAP)
- Temporary Assistance for Needy Families (TANF)
- The Food Distribution Program on Indian Reservations (FDPIR)

A) If no one in your household participates in any of the above B) If a	anyone in your household participates in any of the above listed programs
listed programs: • W	Vrite a case number for SNAP, TANF, or FDPIR. You only need to provide one c
Leave STEP 2 blank and go to STEP 3. the second secon	nese programs and do not know your case number, contact: [State/local agency]
• Gu	Go to STEP 4.

# **STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS**

### How do I report my income?

- Use the charts titled "Sources of Income for Adults" and "Sources of Income for Children," printed on the back side of the application form to determine report.
- Report all amounts in GROSS INCOME ONLY. Report all income in whole dollars. Do not include cents.
  - o Gross income is the total income received before taxes.
- Many people think of income as the amount they "take home" and not the total, "gross" amount. Make sure that the income you report on this application I taxes, insurance premiums, or any other amounts taken from your pay.
- Write a "0" in any fields where there is no income to report. Any income fields left empty or blank will also be counted as a zero. If you write "0" or leave any f (promising) that there is no income to report. If local officials suspect that your household income was reported incorrectly, your application will be investigated as a zero.
- Mark how often each type of income is received using the check boxes to the right of each field.

### 3.A. REPORT INCOME EARNED BY CHILDREN

A) Report all income earned or received by children. Report the combined gross income for ALL children listed in STEP 1 in your household in the box marke children's income if you are applying for them together with the rest of your household.

What is Child Income? Child income is money received from outside your household that is paid DIRECTLY to your children. Many households do not have any 3.B. REPORT INCOME EARNED BY ADULTS

### Who should I list here?

When filling out this section, please include ALL adult members in your household who are living with you and share income and expenses, even if they are income of their own.

### • Do NOT include:

- o People who live with you but are not supported by your household's income AND do not contribute income to your household.
- o Infants, children and students already listed in STEP 1.

B) List adult household members' names. Print the name of each household member in the boxes marked "Names of Adult Household Members (First and Last)." <u>Do not</u> <u>list any household members you listed in</u> <u>STEP 1</u> . If a child listed in STEP 1 has income, follow the instructions in STEP 3, Part A.	<ul> <li>C) Report earnings from work. Report all income from work in the "Earnings from Work" field on the application. This is usually the money received from working at jobs. If you are a self-employed business or farm owner, you will report your net income.</li> <li>What if I am self-employed? Report income from that work as a net amount. This is calculated by subtracting the total operating expenses of your business from its gross receipts or revenue.</li> </ul>	D) Report income from public a Report all income that applies in t Support/Alimony" field on the app of any public assistance benefits received from child support or alim payments. Informal but regular pa income in the next part.
E) Report income from pensions/retirement/all other income. Report all income that applies in the "Pensions/Retirement/All Other Income" field on the application.	F) Report total household size. Enter the total number of household members in the field "Total Household Members (Children and Adults)." This number MUST be equal to the number of household members listed in STEP 1 and STEP 3. If there are any members of your household that you have not listed on the application, go back and add them. It is very important to list all household members, as the size of your household affects your eligibility for free and reduced price meals.	G) Provide the last four digits of adult household member must en Security Number in the space pro benefits even if you do not have a household members have a Social blank and mark the box to the right

## **STEP 4: CONTACT INFORMATION AND ADULT SIGNATURE**

All applications must be signed by an adult member of the household. By signing the application, that household member is promising that all information completely reported. Before completing this section, please also make sure you have read the privacy and civil rights statements on the back of the application.

A) Provide your contact information. Write your current address	B) Print and sign your name and	C) Mail completed form	D) Share children's
in the fields provided if this information is available. If you have no	write today's date. Print the name of	to:	(optional). On the t
permanent address, this does not make your children ineligible for	the adult signing the application and	Insert School/District	share information al
free or reduced price school meals. Sharing a phone number, email	that person signs in the box "Signature	<mark>address here</mark>	This field is optional
address, or both is optional, but helps us reach you quickly if we	of adult."		eligibility for free or
need to contact you.			

### 2020-2021 Prototype Household Application for Free and

Apply online: INSERT URL HERE

### **Reduced Price School Meals**

Complete one application per household. Please use a pen (not a pencil).

STEP 1	List ALL	. Ho	useh	old	Mem	bers	s wh	o ar	e inf	ants	, chi	ldre	en, ar	nd stu	uden	ts uj	p to ar	nd inc	ludir	g g	rade 1	2 (if	more	spa	ces ar	e re	quir	ed for	additio	nal na	m
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Are you unsure income to inclu-																		e from	any s	ouro								ields bla	if they d ank, you		
Flip the page a the charts titled	Sources		Name	of Ad	lult Ho	useho	old Me	ember	s (Firs	st and	Last)		Ean	nings fro	om Wor	k	Weekly	10.000	w ofter kly 2x N		Monthly		Public / Child S		ance/ t/Alimony	y 1	Weekly	Sec. 10.17	often? 2x Month	Monthly	
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#### STEP 2 Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF, or FDPIR?

If NO > Go to STEP 3.

If YES > Write a case number here then go to STEP 4 (Do not complete STEP 3)

this space.

### STEP 3 Report Income for ALL Household Members (Skip this step if you answered 'Yes' to STEP 2)

Are you unsure what income to include here?

Flip the page and review the charts titled "Sources of Income" for more information.

The "Sources of Income for Children' chart will help you with the Child Income section.

The "Sources of Income for Adults' chart will help you with the All Adult Household Members section.

			Chil	d income
A. Child Income	Weekly		2x Month	Monthly
Sometimes children in the household earn or receive income. Please include the TOTAL income received by all Household Members listed in STEP 1 here.	0	Bi-Weekl y		

#### **B. All Adult Household**

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Members (includingbers not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they do receive income, report total gross income (b your selfey do not receive income from any source, write '0'. If you enter '0' or leave any fields blank, you are certifying (promising) that there is no income to report.

\$

	2x Monthly Month			Weekly Bi-Weekl 2x Month Monthly	
۶ 			Weekly y Bi-Weekl y Month	Pensions/Reti	
N				All Other Income	
a Bi-Weekl		Child Support/Alimon		\$	
f A d		\$		\$ \$	

\$ \$

\$

Last Four Digits of Social Security Number (SSN) X X Primary Wage Earner or Other Adult Household	C	of	Member
---------------------------------------------------------------------------------------------------	---	----	--------

Check if no SSN

### STEP 4 Contact Information and adult signature. Nail completed form to: INSERT YOUR SCHOOL/DISTRICT MAILING ADDRESS HERE

Total Household Members (Children and Adults)

"I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds and that school officials may verify (classe information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws."

Street Address (if available)	Apt #	City	State	Zip	Daytime Phone and
Printed name of adult signing the form	Signature of adult			Today's date	

Printed name of adult signing the form

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Signature of adult

Today's date

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Sources of Income

Sources of Ind	S	ources of Income for				
Sources of Child Income	Example(s)	Earnings from Work	Public Assistance / Alimony / Child Suppor			
- Earnings from work	- A child has a regular full or part-time job where they earn a salary or wages	- Salary, wages, cash bonuses	<ul> <li>Unemployment benef</li> <li>Worker's compensation</li> </ul>			
<ul> <li>Social Security</li> <li>Disability payments</li> <li>Survivor's benefits</li> </ul>	<ul> <li>A child is blind or disabled and receives Social Security benefits</li> <li>A parent is disabled, retired, or deceased, and their child receives Social Security benefits</li> </ul>	- Net income from self- employment (farm or business) If you are in the U.S. Military:	Supplemental Securit Income (SSI)     Cash assistance from State or local government			
-Income from person outside the household	- A friend or extended family member regularly gives a child spending money	- Basic pay and cash bonuses (do NOT include combat pay,	<ul> <li>Alimony payments</li> <li>Child support payment</li> <li>Veteran's benefits</li> <li>Strike benefits</li> </ul>			
-Income from any other source	- A child receives regular income from a private pension fund, annuity, or trust	FSSA, or privatized housing allowances) - Allowances for off-base housing, food, and clothing				

#### OPTIONAL **Children's Racial and Ethnic Identities**

We are required to ask for information about your children's race and ethnicity. This information is important and helps to make sure we are fu Responding to this section is optional and does not affect your children's eligibility for free or reduced price meals.

Ethnicity (check one): Hispanic or Latino Not Hispanic or Latino Race (check one or more): American Indian or Alaskan Native Asian	Black or	African American	Native Hawaiian or
The <b>Richard B. Russell National School Lunch Act</b> requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary	larg∉ appl throu	e print, audiotape, Ameri ied for benefits. Individu	o require alternative means of comn ican Sign Language, etc.), should d aals who are deaf, hard of hearing d Service at (800) 877-8339. Add than English.
Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced price meals and for administration and enforcement of	(AD- write	-3027) found online at: htt a letter addressed to US	of discrimination, complete the USD/ tp://www.ascr.usda.gov/complaint_f SDA and provide in the letter all of th aint form, call (866) 632-9992. Subn
the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.	mail	Office of the As	t of Agriculture sistant Secretary for Civil Rights ence Avenue, SW
In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations		Washington, D.0	0. 20250-9410
and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.	fax: ema This		usda.gov.
Do not fill out For School Use Only			

Annual meetine conversion. weekiy	How often?				wice a Month x 24, Monthly x 12		Eligibility:		
Total Income	Weekly	Bi-Weekly	2x Month	Monthly	Household Size		Free	Reduced	Denied
	0	0	0	0	Categorio	cal Eligibility 🗌	0	0	0
Determining Official's Signature	Date			Confirming Official's Signature	Date	Verifying Official's			