

Sharing Information with Other Programs

Dear Parent/Guardian:

If you are interested in any of the benefits listed below, we must have your permission to share your children's eligibility status. By signing this form, you are certifying that you are the parent/guardian of the children listed below. **Note:** Submitting this form will not change whether your children get free or reduced-price meals.

YES! I do want to share my children's eligibility status for the benefits checked below:

- Fee waiver for **PSAT, SAT, ACT, AP tests or College application fees** shared with High School Student Services.
- Fee waiver for **Prom tickets or Cap & Gown** shared with school Principal.
- Fee waiver for **Field trips** shared with school Principal.
- Fee waiver for **Musical instruments** shared with school Principal.

Child's name: _____

School: _____

Child's name: _____

School: _____

Child's name: _____

School: _____

Signature of Parent/Guardian: _____ Date: _____

Printed name: _____

Address: _____

Return form to: FoodSvc@FairfieldSchools.org or mail to: FPS Food Services, 501 Kings Hwy. East, Suite 210, Fairfield, CT 06825

Nondiscrimination Statement: This explains what to do if you believe you have been treated unfairly.

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. **mail:** U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or
2. **fax:** (833) 256-1665 or (202) 690-7442; or **email:** program.intake@usda.gov

This institution is an equal opportunity provider.