

E-FORMAT Registration and Application Instructions

URL: <https://cafe.strutherscityschools.org/SDMS2>

1. First step to registering for E-FORMAT is to select the “New User Registration” link

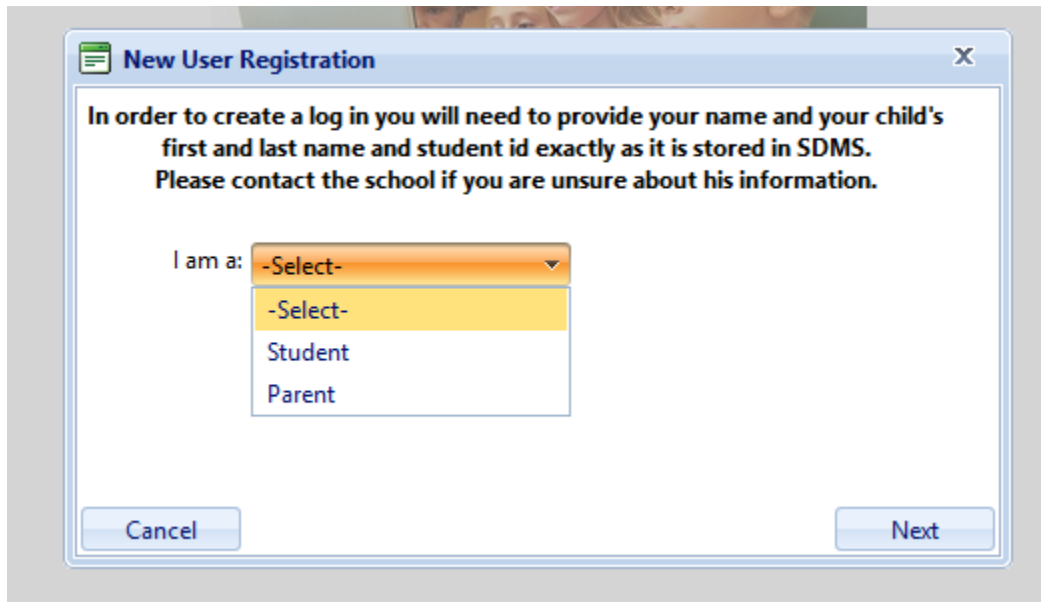
Welcome to Your Student Data Management System



User Name: [New User Registration](#)

Password: [Password Recovery](#)

- Next you need to pick whether you're a parent or student registering



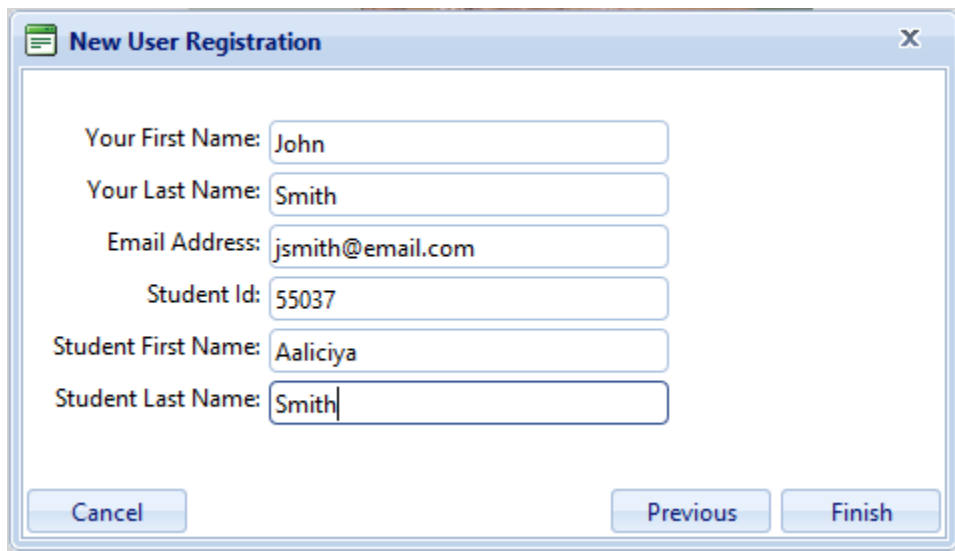
New User Registration

In order to create a log in you will need to provide your name and your child's first and last name and student id exactly as it is stored in SDMS. Please contact the school if you are unsure about his information.

I am a:

- Select-
- Student
- Parent

Then fill out the information:



New User Registration

Your First Name:

Your Last Name:

Email Address:

Student Id:

Student First Name:

Student Last Name:

Create a username, password and security question:

The screenshot shows a 'Log In Information' dialog box with the following content:

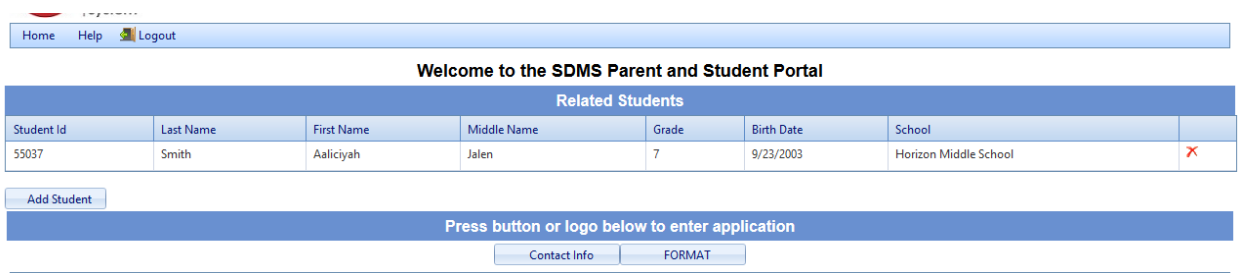
- Header: **Log In Information**
- Message: **Your student information has been verified. Please enter the following information to create a user account.**
- User Id:
- Requirement: **Password must contain a number, a lowercase letter, an uppercase letter, and be between 8 and 20 characters long.**
- Password:
- Confirm Password:
- Message: **Your Security Question and Answer will enable you to reset your password if you forget it. Select a question that has an answer that can not be easily figured out by someone else.**
- Security Question:
- Security Answer:
- Confirm Security Answer:
- Buttons:

3. Now you will use the username and password you just created to sign in to SDMS to begin the application process

The screenshot shows a login form with the following content:

- User Name: [New User Registration](#)
- Password: [Password Recovery](#)
- Log In:

4. Once you're logged in, the screen will look like this below:



The first thing you will want to do is, update your contact info, and you do this by clicking the "Contact Info" button and then filling out all of the info it asks for.

The screenshot shows a 'Contact Information' dialog box with the following fields and values:

- Preferred Delivery Method: Email
- Address: 4376 Kirby Ave NE
- City / State / Zip: Canton OH 44705
- Email Address: jsmith@email.com
- Phone Number: 3305554444

At the bottom of the dialog box are 'Save' and 'Cancel' buttons.

You can also add students if you have multiple students in your family that need added to your applications.

The screenshot shows the SDMS Parent and Student Portal. At the top, there is a navigation bar with links for Home, Help, and Logout. Below this is a welcome message: "Welcome to the SDMS Parent and Student Portal". The main content area is titled "Related Students" and contains a table with the following data:

Student Id	Last Name	First Name	Middle Name	Grade	Birth Date	School	
55037	Smith	Aalicyah	Jalen	7	9/23/2003	Horizon Middle School	X

Below the table is an "Add Student" button. At the bottom of the main content area, there is a blue bar with the text "Press button or logo below to enter application" and two buttons: "Contact Info" and "FORMAT".

Once all of your students and contact info is updated, you can then begin the application process by clicking the "FORMAT" button

5. Once you hit the "FORMAT" button, it will ask you if you want to start a new application.

The screenshot shows a dialog box titled "Select Or Edit Application". Inside the dialog, there is a section titled "Select Application" with the following text: "Select the application you want to work on. Or select Create New Application to start entering a new one." Below this text is a radio button labeled "Create New Application", which is currently selected. At the bottom of the dialog, there are two buttons: "Continue" and "Cancel".

Click on “continue” and then on the next screen it will list the students you have and ask you which ones you would like to include in your application

New Application

Students

Members


The following students are listed as part of the family. Check those that you want to add to the application.

If you are completing an application for other students that are not directly certified you can add the direct certified students as a family member to the application so they are included in your family size.

Aaliciyah Smith

Cancel Next

Next it will ask to add other “Members” such as other guardians to the application if you have any. If you don’t, just click “Next”

 **New Application**

Students

Members

The following people are guardians or are on the previous application as members of the family. Check those that you want to add to the application.

John Smith (You must be a member on the application)

Cancel

Previous

Next

On the next screen, it will ask you questions about each student and each member on the application. You MUST answer or select an option for each question or it will not let you proceed.

New Application

Aaliciyah Smith
John Smith

First Name: Aaliciyah Last Name: Smith

Assistance Type: None of These

Special Situation: None of These

Foster Child: Yes No

Head Start/Even Start: Yes No

Earns Income: Yes No

Cancel Next

New Application

Aaliciyah Smith
John Smith

First Name: John Last Name: Smith

Assistance Type: None of These

Earns Income: Yes No

Income From Work: 400 Weekly

Welfare/Child Support/Alimony: Select Income Frequency

Pension, Retirement, SSI, VA, SS: Select Income Frequency

Other Income: Select Income Frequency

Cancel Previous Finish

Once you finish with these questions click the “Finish” button. You will then be directed to a screen with information regarding the application, after you’ve read through the

statement, press “continue” in the bottom left

FORMAT - Free and Reduced Application Processing

This application is not signed.

Statements
Instructions
Students
Members
Sign Application

The Richard B. Russell National School Lunch Act 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 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 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 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. The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal and, where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish). Persons with disabilities who wish to file a program complaint, please see information above on how to contact us by mail directly or by email. If you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). USDA is an equal opportunity provider and employer.

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Continue

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The next screen is instructions for your application. After you read through these, press continue at the bottom left

FORMAT - Free and Reduced Application Processing

This application is not signed.

Statements
Instructions
Students
Members
Sign Application

INSTRUCTIONS FOR APPLYING
Please read this in it's entirety before proceeding
A HOUSEHOLD MEMBER IS ANY CHILD OR ADULT LIVING WITH YOU.
IF ANY HOUSEHOLD MEMBER RECEIVES BENEFITS FROM SNAP, TANF, OR FDPIR, AND THAT FAMILY MEMBER IS A STUDENT FOLLOW THESE INSTRUCTIONS:

1. Go to Students: Make sure the student(s) receiving benefits from an Assistance Program have their case numbers entered and all students in the family are listed.
2. Go to Household Members: If not already listed, add the household member who will be electronically signing the application. You do not need to enter income information.
3. Go to Sign Application: Sign the form. The last four digits of a Social Security Number are not necessary, you can select No SSN. Contact information is optional but recommended if we need to contact you.

IF ANY HOUSEHOLD MEMBER RECEIVES BENEFITS FROM SNAP, TANF, OR FDPIR, AND THAT FAMILY MEMBER IS NOT A STUDENT FOLLOW THESE INSTRUCTIONS:

1. Go to Students: Make sure all students in the family are listed. You do not need to enter income information for students.
2. Go to Household Members: If not listed, add the family member who is receiving the benefits and add them including their case number.
3. If not already listed, add the household member who will be electronically signing the application. You do not need to enter income information.
4. Go to Sign Application: Sign the form. The last four digits of a Social Security Number are not necessary you can select No SSN. Contact information is optional but recommended if we need to contact you.

IF NO ONE IN YOUR HOUSEHOLD GETS SNAP, TANF, OR FDPIR BENEFITS AND IF ALL CHILDREN IN THE HOUSEHOLD ARE HOMELESS, A MIGRANT OR RUNAWAY, OR ATTEND A HEAD START OR EVEN START PROGRAM FOLLOW THESE INSTRUCTIONS:

1. Go to Students: Make sure all students in the family are listed. Indicate which of the above situation applies to each student. You do not need to enter income information.
2. Go to Household Members: Add the household member who will be electronically signing the application. You do not need to enter income information.

Previous Continue


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This next screen will list all of the students on the application, and at this time you can press the pencil at the end on the left to edit any information about that student.

FORMAT - Free and Reduced Application Processing

This application is not signed.

Verify all **students that are part of the family and attend the school district you are applying to** are listed below and all the information about them is correct.

Id	Name	Grade	School	Categorical?	Income?	Foster/HeadStart?	Other Source?	
55037	Smith, Aaliciyah	7	Horizon Middle School	No	No	No	No	

Previous Continue

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When you're happy with the information about each student, press continue on the bottom left of the screen.


This next screen lets you edit info about family members and guardians that are also on the application. You can also add application members by selecting the "+" button.

FORMAT - Free and Reduced Application Processing

This application is not signed.

Verify all household members **that are not students in the school district you are applying to** are listed below and all the information about them is correct. Be sure to include the person who will be signing the application.

[+](#) Add Application Member

Name	Earnings	Welfare...	Pension...	Other	Categorical?		
Smith, John	400 Weekly	None	None	None	None		


Previous Continue

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Below is how you add a member to the application, when you are finished entering the info, make sure to hit the "Insert" Button

This application is not signed.

Verify all household members that are not students in the school district you are applying to are listed below and all the information about them is correct. Be sure to include the person who will be signing the application.




+ Add Application Member							
Name	Earnings	Welfare...	Pension...	Other	Categorical?		
First Name	Last Name						
Jane	Smith						
Assistance Type							
None of These							
Earns Income							
<input type="radio"/> Yes <input checked="" type="radio"/> No							
<input type="button" value="Insert"/> <input type="button" value="Cancel"/>							
Smith, John	None	None	None	None	None		

You can now see all members listed once you add a new member

FORMAT - Free and Reduced Application Processing

This application is not signed.

Verify all household members that are not students in the school district you are applying to are listed below and all the information about them is correct. Be sure to include the person who will be signing the application.

+ Add Application Member							
Name	Earnings	Welfare...	Pension...	Other	Categorical?		
Smith, John	None	None	None	None	None		
Smith, Jane	None	None	None	None	None		

Now is where you sign your application.

FORMAT - Free and Reduced Application Processing

This application is not signed.
Please select the Signer for the application. You MUST click Sign to complete your application.

Statements
Instructions
Students
Members
Sign Application

Family Member: John Smith
Last 4 of SSN: ***-**- No SSN/Not Applicable
Preferred Language: English

Electronic Signature
By entering my password below I certify (promise) that all the information on this application is true and that all income is reported. I understand that the school will get Federal funds based on the information I give. I understand that school officials may verify (check) the information. I understand that if i purposely give false information, my children may lose meal benefits, and I may be prosecuted.

Password:

Previous Sign Application

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Enter the last 4 digits of your Social Security number and then you will need to enter your SDMS password again at the bottom and then press “Sign Application”

Once your application is signed, you will get a confirmation and the ability to download and print your determination letter

Home Help Logout

FORMAT - Free and Reduced Application Processing

Application Signed:7/20/2015 At 09:46 AM
Your application is now complete. Thank you for using the online application system.

[Download Determination](#)

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At this point, you are finished and can log out.