APPLY FOR FREE/ REDUCED MEALS ONLINE

Parents log in to Skyward Family Access with your parent login and password. Select **"Food** Service" from the left menu.

	Family Access		Select any <u>one</u> Click Applicatio pending applica	student from the ons link. A pop-up ations. Return to t	drop-down list. will appear showing any his page to check status.	ory Exit
SKYWARD"	All Students					
Home	BROTHER CARTER			Applications		
Calendar	STUDENT CARTER	alance	Today's Lunch Menu	Lunch Calendar	Print Reports	
Guieridai	STUDENT: 3	8.90	No lunch menu details are av	ailable for the current date.	STUDENT: Statement	

Only (1) application needs to be filled out **per** household. First Step: You **MUST** select a student to be able to begin the application process. You can later add any remaining household members as instructed below. To start an application, click on "Add Application"

od Service Applicatio	ons						
Pending Application	Add Application F	Print Application					
No pending applicat	tion was found.				Click	Add App	lication.
STUDENT (169)							
Temp Application	Application Date	Effective Date	Dependents	Lunch Code	Denied?	Active?	Application Nbr
No	Mon Jan 1, 1900	Mon Jan 1, 1900	0	Normal	No	Yes	

ATTENTION! If you are unable to add an application & receive a Direct Cert message this means the State Directly Certified the application already and the status is FREE. Med-Red = (Medicaid) Reduced status.

Application for Free and Reduced Price School Meals

Steps	Application for Free and Reduced Price School Meals	
Letter to Parents	Letter to Parents	
Instructions for Applying		
Federal Income Chart		
Privacy Act Statement		_
Non-discrimination Statement	Dear Parent/Guardian:	
Application • Step 1: Child Names • Step 2: Benefits • Step 3: Gross Income	Children need healthy meals to learn. Jordan School District offers healthy meals every school day. Break children may qualify for free meals or for reduced price meals. Reduced price is \$.30 for breakfas application for free or reduced price meals benefits, and a set of detailed instructions. Below are some of the application process. 1. WHO CAN GET FREE OR REDUCED PRICE MEALS? • All children in households receiving benefits from Supplemental Nutrition Assistance Program Reservations (FDPR), or Temporar Assistance for Needy Families (TANF) are eligible for free meals.	
• Step 4:	• Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals.	
Optional:	 Children participating in their school's Head Start program are eligible for free meals. 	
Ethnicity and Race	 Children who meet the definition of homeless, runaway, or migrant are eligible for free meals. 	
Review and Submit	• 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 fails at or below the limits on this chart. FEDERAL INCOME CHART For School Year 2016-17 Household Size Yearly Monthly Weekly 1 21,978 1,832 423 2 29,637 2,470 570 3 37,296 3,108 718 4 44,955 3,747 865 5 52,614 4,385 1,012 6 60,273 5,023 1,160 7 67,951 5,663 1,307 8 7 5,642 1	
	8 /3,04/ 0,304 1,455	
	Z 606 642 148	
	 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 lwing 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 meaks, please call or e-mail 801-567-8765 or jule.dunn@jordandistrict.org. Do I KEED TO FILL OUT AN APPLICATION FOR EACH CHILD? No. Use one Free and Reduced Price School Meak 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: Nutrition Services, 7905 S Redwood Rd, West Jordan, UT 84088 or email to Jule.dunn@jordandistrict.org. 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 Jule at 801-567-8765 immediately. 	

Steps	Application for Free and Reduced Price School Meals		Previous	Next	Print	Back		
Letter to Parents → Instructions for Applying	Instructions for Applying. Please select the option below a Questions can be directed to contact information supplied in the Instructions for Applying and would like	fter reviewing all information. he Letter to Parents. a to continue the application						
Federal Income Chart Privacy Act Statement Non-discrimination Statement Application • Step 1: Child Names • Step 2: Benefits	Please use these instructions to help you fill out the application household, even if your children attend more than one school children for free or reduced price school meals. Please follow these instructions in order! Each step of the inst what to do next, please contact Julie at 801-567-8765 or Juli PLEASE USE A PEN (NOT A PENCIL) WHEN FILLING OUT							
Step 3: Gross Income Step 4: Signature Optional: Ethnicity and Race	STEP 1: LIST ALL HOUSEHOLD MEMBERS WHO ARE INFANTS, CHILDREN, AND STUDENTS UP TO AND INCLUDING GRADE 12 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?							

Application for Free a	nd Reduced Price School Meals	
Steps	Application for Free and Reduced Price School Meals	Previous <u>N</u> ext <u>Print</u> <u>Back</u>
Letter to Parents Instructions for Applying Federal Income Chart	Your children may qualify for free or reduced price meals If you do not qualify for benefits or do not wish to complete an I do not qualify for benefits or do not wish to complete	if your household income falls within the limits on this chart. n application, check the option below.
Non-discrimination Statement Application • Step 1: Child Names • Step 2: Benefits • Step 3: Gross Income • Step 4: Signature • Optional: Ethnicity and Race	FEDERAL INCOME CHART For School Year 2016-17 Household Size Yearly Monthly Weekly 1 21,978 1,832 423 2 29,637 2,470 570 3 37,296 3,108 718 4 44,955 3,747 865 5 52,614 4,385 1,012 6 60,273 5,023 1,160	If you do not qualify or do not wish to complete an application, check the option "I do not qualify for benefits or do not wish to complete an application". Click Next to complete an application.
Review and Submit	7 67,951 5,663 1,307 8 75,647 6,304 1,455 Each Additional Person: 7,696 642 148	

Application for Free an	nd Reduced Price School Meals	
Steps	Application for Free and Reduced Price School Meals	Previous Next Print Back
Letter to Parents	Privacy Act Statement: This explains how we will use the information	ation you give us.
Instructions for Applying		
Federal Income Chart		Review Privacy Act Statement.
Privacy Act Statement		
Non-discrimination Statement	The Richard B. Russell National School Lunch Act requires the information we cannot approve your child for free or reduced price meals. You must	Click Next.
Application	member who signs the application. The last four digits of the Social Sectory (SNAR).	list
Step 1: Child Names	Reservations (FDPIR) case number or other FDPIR identifier for your child	or when you indicate that the adult household member signing the application
Step 2:	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
• Step 3:	programs to help them evaluate, fund, or determine benefits for their pr	rograms, auditors for program reviews, and law enforcement officials to help then
Gross Income	look into violations of program rules.	

Application for Free an	d Reduced Price School Meals		
Steps	Application for Free and Reduced Price School Meals	Previous Next Print Back	
Lattas ta Davata	Non-discrimination Statement: This explains what to do if you believe you hav	e been treated unfairly.	
Letter to Parents			
Instructions for Applying		Review Non-discrimination Statem	nent.
Federal Income Chart			
Privacy Act Statement			
	This institution is an equal opportunity provider.	Click Next.	
Non-discrimination Statement			

Application for Free a	nd Reduced Price School Meals	5								
Steps	Application for Free and Reduced Price School Meals					Previous Next Print Back				
Letter to Parents Instructions for Applying Federal Income Chart Privacy Act Statement	Step 1 - List ALL Household Members who If more spaces are required for additional n	Step 1 - List ALL Household Members who are infants, children, and students up to and including grade 12. If more spaces are required for additional names, attach another sheet of paper. Add More Names to Application								
Non-discrimination Statement Application → Step 1: Child Names	Definition of Household Member: Anyone Children in Foster care and children who n Free and Reduced Price School Meals fr	e who is livir neet the de or more info	ng with efinition ormation Ch	you and sh of Homele n. leck all	ares income a ss, Migrant c	nd expenses, even if not related. 3r Runaway are eligible for free meals. Read How to Apply for				
• Step 2: Benefits • Step 3: Gross Income	Child's First Name, Middle Initial, Last Name	Student?	Foster Child	t apply Homeless, Migrant, Runaway		Application Step 1: Child Names				
Step 4: Signature	(Example) Student A. Smith	 ✓ 								
Optional:	Student Carter					List all household members who are				
Ethnicity and Race	Brother Carter					infants, children, and students up to and				
Review and Submit	Sister Carter	v				iniants, children, and students up to and				
	Baby Carter					including grade 12.				

Application for Free an	d Reduced Price School Meals						
Steps	Application for Free and Reduced Price School Meals Previous Next Print Back						
Letter to Parents	tep 2 - Do any Household Members (including you) currently participate in one or more of the following assistance programs?						
Instructions for Applying							
Federal Income Chart							
Privacy Act Statement		Application Step 2: Bene	fits				
Non-discrimination Statement	SNAP, TANF, or FDPIR						
Application	If you didn't check the box: Complete STEP 3.						
 Step 1: Child Names → Step 2: Benefits 	If you checked the box: Write a case number here then go to Step 4 (Do not complete STE Case Number:	:P 3)					

Application for Free a	nd Reduced Price School Mea	ls								
Steps	Application for Free and Reduced Price School Meals Previous Next Print Back						Next Print Back			
Letter to Parents Instructions for Applying	Step 3 - Report Income for ALL Househo	ild Members (S	kip ti	his s	tep if you answ	vered 'Y	'es' to STEP 2)			
Federal Income Chart Privacy Act Statement Non-discrimination Statement Application • Step 1: Child Names	Please read Instructions for Applying f question. The Sources of Income for A A. Child Income	or more inform dults section	natior will h	n. T ielp	he Sources of you with the A	Incom II Adul	e for Childi t Househol	App Nee com	lication Step 3: Gross Income ds to include any & all income ing into the home.	
Step 2: Sometimes children in the household earn income. Please include the TOTAL in Benefits Benefits Gross Income and How Often It Was Received [2] Gross Income Child Income: \$0] Step 4: B. All Adult Household Members (including yourself) Signature List all Household Members not listed in STEP 1 (including yourself) excite any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back you are cartifying (normsking) that there is no income to any field back yo					do not y do no eport.	receive income t receive incom	. For eacl e from ar	h Household Member listed, if they do y source, write '0'. If you enter '0' or		
Review and Submit	Name of Aduit Household Members First Name, Middle Initial, Last Name	e of Adult Household Members lame, Middle Initial, Last Name Earnings from Work					Pensions, Reti All Other In	Received [2] ensions, Retirement, All Other Income		
	(Example) Jane A. Smith	\$200	W		\$150	в	\$50	М		
	Dad Carter	\$1,000	Μ	-	\$0	-	\$0			
	Mom Carter	\$200	в	-	\$0	+	\$0	-		
	Big Brother	\$500	М	-	\$0	-	\$0	-		
	Big Sister	\$0	- 3	-	\$0	•	\$0	-		
		\$0	1	-	\$0	•	\$0	-		
		\$0	3	-	\$0	- *	\$0	- *		
	 * Total Household Members (Childi * Last Four Digits of Social Security N Primary Wage Earner or Other Adult Hou 	ren and Adults umber (SSN) o sehold Membe): of r: **	*_**	8	Che	ck if no SSN			

Application for Free a	nd Reduced Price School Meals	
Steps	Application for Free and Reduced Price School Meals	Previous <u>N</u> ext <u>Print</u> <u>B</u> ack
Letter to Parents Instructions for Applying Federal Income Chart	Step 4 - Contact Information and Adult Signature	Application Step 4: Signature
Non-discrimination Statement Application • Step 1: Child Names • Step 2: Benefits • Step 3: Gross Income • Step 4: Signature	I certify (promise) that all information on this application is true and the with the receipt of Federal funds, and that school officials may verify (children may lose meal benefits, and I may be prosecuted under applic Street Address (if available): 1234 Thisismy Street City: Advisory Street City: Advisory Street city: Advisory Street completing the form: Today's Date: 05/09/2017	at all income is reported. I understand that this information is given in connection check) the information. I am aware that if I purposely give false information, my cable State and Federal laws 1. Daytime Phone: (801) 123-4567 Ext: State: UT Zip Code: 84084 * Signature of adult completing the form: < <signed electronically=""> Remove Email (optional): mom@email.com</signed>

Steps	Application for Free and Reduced Price School Meals Previous Next Print Back
Letter to Parents Instructions for Applying Federal Income Chart Bridge Act Statement	Optional - Children's Ethnic and Racial 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 fully serving our community. Responding to this section is optional and does not affect your children's eligibility for free or reduced price meals.
Non-discrimination Statement Application • Step 1: Child Names • Step 2: Benefits	I would like to report this optional information Mark one ethnic identity: Mark one or more racial identities: Image: Mispanic/Latino Asian American Indian or Alaska Native Black or African American American Image: Not Hispanic/Latino White Native Hawaiian or Other Pacific Islander
• Step 3: Gross Income • Step 4: Signature • Optional: Ethnicity and Bace	Application Optional: Ethnicity and Race

Application for Free a	and Reduced Price School Me	eals					
Steps	Application for Free and Reduced Price School Meals						ous <u>P</u> rint <u>B</u> ack
Letter to Parents Instructions for Applying Federal Income Chart Privacy Act Statement Non-discrimination Statement Application • Step 1: Child Names • Step 2: Benefits • Step 3: Gross Income • Step 4: Signature • Optional: Ethnicity and Race	Please review the completed application and click the button to submit the application. Submit Application Will not be considered until the Submit Application button is clicked. Step 1 - List ALL Household Members who are infants, children, and students up to and including grade If more spaces are required for additional names, attach another sheet of paper. Definition of Household Member: Anyone who is living with you and shares income and expenses, eve Children in Foster care and children who meet the definition of Homeless, Migrant or Runaway are Foremered Bedrate Bedrate based for the statement of the sta						still see the message, you not Submitted application. on the Submit cation button to ft of this
	Child's First Name, Middle Initial, Last Name Student Carter	Student?	Foster Child	Homeless, Runaway	message. Review and Submit		age.
	Brother Carter						
	Sister Carter	1					



Food Service Applications									
Pending Application Update Pending Application View Application Print Application									
Application Date: Tue May 9, 2017 (Application Waiting For Approval)									
Notice: Pending Application will be marked as 'Not Submitted' if edited and will need to be resubmitted for review.									
Household Members									
Names of Children	Student?	Foster C	Select links to update, view and print application.						
Student Carter	Yes	No							
Brother Carter	Yes	No		No					
Sister Carter	Yes	No		No					
Baby Carter	No	No		No					
Income Information									
Household Member Name	Earnings from Work	Public Assistance, Child Support, Alimony		Pensions, Retirement, All Other Income					
Dad Carter	12,000.00	(0.00	0.00					
Mom Carter	5,200.00	(0.00	0.00					
Big Brother	6,000.00	(0.00	0.00					
Big Sister	0.00	(0.00	0.00					
Child Income	0.00		0.00	0.00					
Total Annual Income: 23,200.00									