

**CHILD AND ADULT CARE FOOD PROGRAM
PUBLIC MEDIA RELEASE
(Child Care Center—Nonpricing Program)**

The _____ announces participation in the Child and Adult Care Food Program (CACFP). The CACFP is available without charge to all enrolled children at the following location(s):

Center:

Address:

City:

Zip Code:

U.S. DEPARTMENT OF AGRICULTURE NONDISCRIMINATION STATEMENT

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations 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.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.), should contact the agency (state or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at 800-877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#), (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call 866-632-9992. Submit your completed form or letter 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
2. Fax: 202-690-7442
3. Email: program.intake@usda.gov

This institution is an equal opportunity provider.

For more information, contact:

Name: _____ Phone: _____
 Address: _____ City: _____ Zip Code: _____

INCOME ELIGIBILITY SCALE

Effective from July 1, 2019, through June 30, 2020

Centers Free Scale:

Household size	Annual	Monthly	Twice per month	Every two weeks	Weekly
1	\$16,237	\$1,354	\$677	\$625	\$313
2	\$21,983	\$1,832	\$916	\$846	\$423
3	\$27,729	\$2,311	\$1,156	\$1,067	\$534
4	\$33,475	\$2,790	\$1,395	\$1,288	\$644
5	\$39,221	\$3,269	\$1,635	\$1,509	\$755
6	\$44,967	\$3,748	\$1,874	\$1,730	\$865
7	\$50,713	\$4,227	\$2,114	\$1,951	\$976
8	\$56,459	\$4,705	\$2,353	\$2,172	\$1,086
For each additional family member, add	\$5,746	\$479	\$240	\$221	\$111

Centers Reduced Scale:

Household size	Annual	Monthly	Twice per month	Every two weeks	Weekly
1	\$23,107	\$1,926	\$963	\$889	\$445
2	\$31,284	\$2,607	\$1,304	\$1,204	\$602
3	\$39,461	\$3,289	\$1,645	\$1,518	\$759
4	\$47,638	\$3,970	\$1,985	\$1,833	\$917
5	\$55,815	\$4,652	\$2,326	\$2,147	\$1,074
6	\$63,992	\$5,333	\$2,667	\$2,462	\$1,231
7	\$72,169	\$6,015	\$3,008	\$2,776	\$1,388
8	\$80,346	\$6,696	\$3,348	\$3,091	\$1,546
For each additional family member, add	\$8,177	\$682	\$341	\$315	\$158

A household of one means a child who is his or her sole support. Foster children are one-member households only if the welfare or the placement agency maintains legal responsibility for the child. Household is synonymous with family and means a group of related or unrelated individuals who are not residents of an institution or boarding house, but who are living as one economic unit sharing housing and all significant income and expenses.

This scale does not apply to households that Food Stamps (known as CalFresh in California), California Work Opportunity and Responsibility to Kids, or Food Distribution Program on Indian Reservations. Those children are automatically eligible for free meal benefits.

PUBLIC MEDIA RELEASE INFORMATION AND INSTRUCTIONS

All independent centers and center sponsors must issue a public release to the media in their service areas within 30 days of approval announcing the availability of the CACFP in their center(s). This release must include:

- Name and address of each center that is participating in the CACFP.
- A statement that the center does not discriminate against any person because of race, color, national origin, sex, age, or disability.

Centers and center sponsors **are not required to pay** for this public notice. The media (i.e., newspapers, magazines, and radio and television stations serving the area) often provide a portion of free space for public service announcements. Whether or not the media uses the public release, your responsibility has been fulfilled when the release is sent to the media.

You must submit documentation of your efforts to publicize the program to the California Department of Education and have it available for audit or administrative review. The documentation requirement includes a cover letter such as the sample below:

(Date of Mailing)

Dear Public Media (Name of newspaper, radio station, etc.):

The XYZ Child Care Center participates in the U.S. Department of Agriculture's Child and Adult Care Food Program. To ensure access to the program by children within our community, we are required to notify the media in our service areas of our participation in the program.

Attached is our public announcement of participation. Please use this information as a free public service announcement.

Thank you for your assistance in serving the children of our community.

Sincerely,

Child Care Center