Lodi School District Food Service Information School Year 25/26

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Ariel Andrews, Food Service Administrative Assistant, Lodi Primary School, 1307 Sauk Street Lodi WI 53555
(608) 592-3855 ext. 1017 andrear@lodischoolswi.org (contact for free/reduced applications & account balances/account issues)

The following are important highlights of the food service program and should be saved for reference throughout the year, along with reviewing each school's student handbook, for more specific information. Food service information is also available on the district website.

School Year 25/26 PRICES:

Student Lunch
- Grades K-5...$3.10
- Grades 6-12...$3.20
- Reduced Lunch...$0.40

Student Breakfast...$1.85
- Reduced...$0.30

Ala Carte.... priced individually per item
Adult Lunch **...**$4.75
Adult Breakfast...$2.75
Milk or Juice ...$0.85
4K (Optional)
- Milk Yearly Fee...$65.00
- Snack Yearly Fee...$50.00

Family food service account & payments: **All food service money is deposited into ONE family account for all students in grades K-12.** Daily purchases are deducted from this account. Deposits may be mailed to food service (see address above) or completed online. After school begins the students can drop them in the deposit box located by each school office. Include the student's and family account name with your payment. **Deposit a sufficient amount of monies to cover all food service costs: including ala carte, nutrition break, extra entrees, and milk purchases.** The online payment option is available for deposits in the family food service account. Log in to the IC parent portal and click on the PAYMENT link on the left side. You will be required to register your payment information the first time it is utilized. The payment will be credited into the account immediately after the payment is completed. **It is each household's responsibility to monitor the account balance.** Balance information may be viewed online at the Infinite Campus parent portal and is displayed to the students on the checkout terminal. You may contact the food service department to block all ala carte purchases (except milk) per student. **The system is PRE-PAY and NOT a CHARGING account.** Money must be turned in BEFORE 9:00 am daily. Money received after this time may NOT be credited to the account until the following business day. Contact food service directly with any account questions or if your family is experiencing financial hardship.

***4K Students Yearly milk and/or snack fee:** **This is an optional yearly fee and should only be paid if a 4K student would like a daily milk and/or a healthy snack item provided *by* food service.** All snacks shall meet the USDA "Smart Snack" guidelines. The fee should be paid once a year and be clearly labeled with the student(s) name and or can be paid online. The yearly cost is: 4K break milk $65.00 and/or 4K snack break $50.00.

Infinite Campus (IC) account access and balance notifications: **When the account balance falls below $20.00 or is negative, you will be notified by the IC system that a payment is due.** All adult members of a household will receive the messenger notification for account balance information. Each member may edit their contact preference within the IC parent portal. The account link will give real-time access to all student purchases. Selecting the account number in the index will access the food service section. All deposits and purchases for the selected month are displayed in a table. Below the table is the account balance at the end of the selected month. To print a copy of the transactions, select the generated report which is located at the bottom right of the page and print the PDF that appears. For specific questions relating to parent portal access contact Kris Karls at 592-3851 ext. 5483 or email karlskr@lodischoolswi.org

Student PIN: All students are issued a four-digit Personal Identification Number (PIN) that is entered when making purchases. The PIN stays the same every year. Kindergartners and new students will receive their PIN from food service staff after their enrollment is completed. Students who qualify for the free meal program will also be required to enter their PIN.

Menu/Meal options/Nutrition Information: Monthly Breakfast and Lunch Menus are created for each school. Menus can be found through the link on the district website or viewed on our **Food4Life** App**.** The free app can be downloaded to your phone by searching for Food4Life. You will be able to choose the school where you or your students attend and have convenient access to the menus, allergens, and nutritional information. You can learn more about our commitment to healthy meals and our Food4Life Initiative on the Lodi lunch program website.

Free/Reduced Lunch & Breakfast Program: Any family that is approved by the direct certification process will receive an approval letter and will NOT need to fill out an application. All other families MUST fill out a new application every year. Complete and return the application as soon as possible to take full advantage of the free/reduced meal program. An application is enclosed and may also be printed from the district's web site or picked up at each school office. The free/reduced meal program does NOT include the purchase of break milk, single milk/juice or any ala carte purchases. After the family application is reviewed, a letter will be sent confirming your status, keep a copy of this letter to prove your eligibility status. The district may offer reduced and/or waived fees (examples: registration & athletic passes) when you qualify for the free/reduced meal program or if you have a financial hardship. If you are interested in this option only YOU may request to participate and share your information with the appropriate district staff.

****Negative Balance Procedure:** **It is established that the District's Food Service program utilizes a debit system. Money must be available in the family account before purchases will be allowed.** Deposits may be sent to each school building, paid online with the IC parent portal or mailed to the attention of the food service department. Families may monitor and view their account balance and detailed statement within the IC parent portal or request a statement from the food service department. Students may view their account balance on the point of sale terminal during meal service. When the account balance starts to fall below $20.00 the family will be notified by the IC system that a payment is required and will continue until a deposit has been received. **If a family account has a negative balance and no payment or response from the family has been received the student's name will be forwarded to the building secretaries. They will talk with the student and help them contact a parent who can choose to make a deposit or bring a meal from home. It is designed so as to avoid denying the student a meal while in the food service line. Absolutely no ala carte purchases shall be allowed once the account is negative.**

District Wellness Policy: The Food Service program is linked closely to the District Wellness Policy. The policy, along with procedures, can be viewed on the district website and feature guidelines that help shape the wellness environment within the district. Highlights include: physical activity, wellness education, school meals, ala carte/vending/snack items, learning incentives & classroom activities. Please review the policy for additional information. Families are encouraged to join the wellness committee and may do so by contacting the school for more information.

LETTER TO HOUSEHOLDS/FREQUENTLY ASKED QUESTIONS - SCHOOL YEAR 2025-26

Dear Parent/Guardian:

Children need healthy meals to learn. The School District of Lodi offers healthy meals every school day. Breakfast costs **Grades K-12 $1.85**; lunch costs **Grades K-5 $3.10 & Grades 6-12 $3.20**. Your children may qualify for free meals or for reduced price meals. Reduced price is **$0.30** for breakfast and **$0.40** 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 Food Share, the Food Distribution Program on Indian Reservations (FDPIR), or W-2 cash benefits are eligible for free meals, when listed on the application.
   - 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 qualify to receive free or reduced-price meals if your household income is at or below the limits on the Federal Income Eligibility Guidelines.

FEDERAL ELIGIBILITY INCOME CHART for School Year 2025-26			
Household size	Yearly ($)	Monthly ($)	Weekly ($)
1	28,953	2,413	557
2	39,128	3,261	753
3	49,303	4,109	949
4	59,478	4,957	1,144
5	69,653	5,805	1,340
6	79,828	6,653	1,536
7	90,003	7,501	1,731
8	100,178	8,349	1,927
Each additional person:	10,175	848	196

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 have not been told your children will get free meals, please call or e-mail **Adria Schroeder at 608-592-3851 ext. 5486 or** schroad@lodischoolswi.org.

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: **Ariel Andrews, Lodi Primary School, 1307 Sauk Street, Lodi, WI 53555.**

4. SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE OR REDUCED-PRICE MEALS? Please read the letter you received carefully and follow the instructions. If your letter indicated you qualify for free meals, then no application is needed. If any children in your household were missing from your eligibility notification, contact **Ariel Andrews at 608-592-3855 ext. 1017 or** andrear@lodischoolswi.org immediately. If your household was notified it qualified for reduced price meals, we encourage you to complete an application to potentially qualify for free meals based on household size and income.

5. **DO I NEED TO FILL OUT AN APPLICATION IF MY CHILD ATTENDS A SCHOOL PARTICIPATING IN THE SEAMLESS SUMMER OPTION (SSO) OR COMMUNITY ELIGIBILITY PROVISION (CEP) SCHOOL?** If your child attends a school that participates in SSO OR CEP, **receipt of free breakfast and lunch meals does not depend on returning this application. However, this information is necessary for other programs and may be used to determine if your household is eligible for additional benefits.**

6. 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 https://lodiwi.infinitecampus.org/campus/portal/lodi.jsp **(Infinite Campus parent portal)** to begin or to learn more about the

online application process. Contact **Ariel Andrews at 608-592-3855 ext. 1017 or** andrear@lodischoolswi.org if you have any questions about the application process.

7. 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 **October 14th, 2025** or when a new eligibility is determined. You must submit a new application unless the school told you that your child is eligible for the new school year. If you do not submit 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.

8. I GET WIC. CAN MY CHILDREN GET FREE MEALS? Children in households participating in WIC may be eligible for free or reduced-price meals, but it is based on income. **Please submit an application**.

9. MY CHILD PARTICIPATES IN BADGERCARE PLUS OR MEDICAID. CAN MY CHILD GET FREE MEALS? Children participating in Badger Care Plus or Medicaid may be eligible for free or reduced-price meals, but it is based on income. **Please submit an application.**

10. **WILL THE INFORMATION I GIVE BE CHECKED? Yes. We may also ask you to send written proof of the household income you report.**

11. 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 or experience a financial hardship may become eligible for free and reduced-price meals if the household income drops below the income limit.

12. 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: **Sarah Raemisch, School Board Clerk, 115 School Street, Lodi, WI 53555, Phone 608-592-3851 ext. 5482 or** raemisa@lodischoolswi.org.

13. 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.

14. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you normally receive. For example, if you normally make $1000 each month, but you missed some work last month and only made $900, put down that you made $1000 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.

15. 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 meant to do so.

16. 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. Do not include any combat pay resulting from deployment as income.

17. WHAT IF THERE IS NOT 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.

18. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for Food Share or other assistance benefits, contact your local assistance office or call 1-800-362-3002.

19. IF THIS APPLICATION IS APPROVED WILL MY CHILD RECEIVE SUMMER EBT BENEFITS? Yes. An approved Household Application for Free or Reduced Priced Meals qualifies your household for Summer EBT benefits. More information is available at https://dpi.wi.gov/school-nutrition/programs/SummerEBT.

If you have other questions or need help, call **Ariel Andrews at 608-592-3855 ext. 1017**.

Sincerely,

Diane Lueck

Director of Food Service

USDA Food and Nutrition Service
U.S. DEPARTMENT OF AGRICULTURE

How To Apply for Free and Reduced Price School Meals

Please use these instructions to help you fill out the application for free and reduced price school meals. You only need to submit one application per household, **even if your children attend more than one school in the School District of Lodi.**

The application must be filled out completely to determine the eligibility of your child(ren) 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 District of Lodi, Ariel Andrews at 608-592-3855 or andrear@lodischoolswi.org.

Please use a pen (not a pencil) when filling out the application and do your best to print clearly.

Step 1: List ALL children, infants, and students up to and including grade 12

Tell us how many infants/toddlers, children not in school, and elementary/middle/high 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 formal foster arrangement through a court or state/local agency, or qualify as homeless, migrant, or runaway youth;
- Students attending (regardless of age) the School District of Lodi

A) List each child's name.	B) Is the child a student?	C) Do you have any foster children?	D) Are any children homeless, migrant, or runaway?
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 (or a second application if completing electronically) with all required information for the additional children. This also applies to adults in Step 3. "MI" is short for middle initial. Print the first letter of each child's middle name in the box.	If "Yes," write the grade level of the student in the "Grade" column to the right.	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. Note: Adopted children are not considered foster children. A foster child is a minor child who has been taken into state custody and placed with a state-licensed adult, who cares for the child in place of their parent or guardian.	If you believe any child listed in this section meets this description, mark the "Homeless, Migrant, Runaway" box next to the child's name and complete all steps of the application. Homeless, Migrant, Runaway status must be confirmed with the appropriate program staff. If the school district cannot confirm your student's homeless, migrant, or runaway status, then the school district will contact you to complete an income-based application. You may choose to provide income information now in order to prevent the school district from potentially needing to contact you later.

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 for free school meals:

- The Supplemental Nutrition Assistance Program (SNAP) or FoodShare
- Temporary Assistance for Needy Families (TANF) or W-2 Cash Benefits
- The Food Distribution Program on Indian Reservations (FDPIR).

A) If no one in your household participates in any of the above listed programs:	**B) If anyone in your household participates in any of the above listed programs:**
• Check "No" in **Step 2** and go to **Step 3.**	• Write a case number for SNAP, TANF, or FDPIR. You only need to provide one case number. If you participate in one of these programs and do not know your case number, contact: https://www.dhs.wisconsin.gov/forwardhealth/imagency/index.htm • Go to **Step 4**.

Step 3: List ALL household members and income for each member

How do I report my income?

- Use the lists titled **"Sources of Income"** & **"Examples of Income for Children,"** on the back side of the application form to determine if your household has income to report.
- Report all amounts in GROSS INCOME ONLY. Report all income in whole dollars. Do not include cents.
  - Gross income is the total income received **before** taxes and deductions.
  - 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 has NOT been reduced to pay for 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 fields blank, you are certifying (promising) that there is no income to report. If local officials suspect that your household income was reported incorrectly, your application will be investigated.
- 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 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 not related and even if they do not receive income of their own.
- ***Do NOT include:***
  - People who live with you but are not supported by your household's income AND do not contribute income to your household.
  - Infants, children and students already listed in **Step 1.**

Step 3: List ALL household members and income for each member

1) List adult household members' names.
Print the name of each household member in the boxes marked "Names of Adult Household Members (First and Last)." Include college students, unless they are declared independently on taxes (all college students are considered adults). Do not list any household members you listed in **Step 1**.

2) List earnings from work.
List 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. Net income is your income after taxes and deductions have been subtracted.

- ***What if I have multiple jobs?*** List each job separately by entering your name and income from each job on a new line. Add an additional sheet of paper if necessary.
- ***What if I am self-employed?*** List income from your business as a net amount. This net amount is calculated by subtracting the total operating expenses of your business from its gross receipts (revenue). Gross receipts or revenue are all the income earned from the sale of any products or services offered.

If a child listed in **Step 1** has income, follow the instructions in **Step 3, Part B.**

3) List income from public assistance/child support/alimony.
List all income that applies in the "Public Assistance/Child Support/Alimony" field on the application. Do not report the cash value of any public assistance benefits NOT listed on the chart. If income is received from child support or alimony, only report court-ordered payments. Informal but regular payments should be reported as "other" income in the next part.

4) List income from pensions/retirement/all other income.
List all income that applies in the "Pensions/Retirement/All Other Income" field on the application.

- ***What if I receive income from multiple sources in this category?*** List each source separately by entering your name and income from each source on a new line. Add an additional sheet of paper if necessary.

5) List 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.

6) Provide the last four digits of your Social Security Number.
An adult household member must enter the last four digits of their Social Security Number in the space provided. You are eligible to apply for benefits even if you do not have a Social Security Number. If no adult household members have a Social Security Number, leave this space blank and mark the box to the right labeled "Check if no Social Security Number."

3.B List income earned by children

List all income earned or received by children.
List the combined gross income for ALL children listed in **Step 1** in your household in the box marked "Child Income." Only count foster 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 child income.

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 has been truthfully and completely reported. Before completing this section, please also make sure you have read the statements on the back of the application.

A) Provide your contact information. Write your current mailing address in the fields provided, if this information is available. If you have no permanent address, that is okay. Sharing a phone number, email address, or both is optional, but helps us reach you quickly if we need to contact you.	B) Print and sign your name and write today's date. Print the name of the adult signing the application and that person signs in the box "Signature of adult."	C) Mail completed application to: School District of Lodi Attn: Ariel Andrews 1307 Sauk Street Lodi, WI 53555

Optional

Share children's racial and ethnic identities (optional). On the back of the application, we ask you to share information about your children's race and ethnicity. This field is optional and does not affect your children's eligibility for free or reduced price school meals. This information is requested solely for the purpose of determining the State's compliance with Federal civil rights laws, and your response will not affect consideration of your application, and may be protected by the Privacy Act. By providing this information, you will assist us in assuring that this program is administered in a nondiscriminatory manner.

Please return the application directly to your child's SCHOOL. DO NOT mail, fax, or email completed applications or questions about applications to the USDA Office of the Assistant Secretary for Civil Rights or your child's eligibility for free or reduced-price meals will be delayed.

2025-26 Household Application for Free and Reduced Price School Meals

APPLY ONLINE: https://lodiwi.infinitecampus.org/campus/portal/lodi.jsp
RETURN TO (School/District Name): Ariel Andrews
ADDRESS: 1307 Sauk Street, Lodi, WI 53555

Complete one application per household. Please use a pen (not a pencil). In Community Eligibility Provision Schools (CEP), receipt of free meals does not depend on returning this application; however, this information is necessary for other programs.

STEP 1 List ALL children, infants, and students up to and including grade 12. Attach another sheet of paper if you need space for more names.

List ALL children in the household. Do not forget to list infants, children attending other schools, children not in school, and children not applying for benefits. This includes children not related to you in your household.

Child's First Name	MI	Child's Last Name	Grade	Check all that apply: Foster Child	Migrant	Runaway	Homeless
				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐

If you checked any of these boxes, please refer to the Application Instruction's Step 1: Part C & Part D.

STEP 2 Do any household members (including you) participate in: FoodShare (SNAP), W-2 Cash Benefits (TANF), or FDPIR?

☐ **NO** → Go to STEP 3. ☐ **YES** → Write case number here and proceed to STEP 4. **PROGRAM NAME:** **CASE NUMBER (NOT EBT NUMBER):**

Badgercare, Medicaid, Summer EBT are not eligible. Write only one case number in this space.

STEP 3 List ALL household members and income for each member (before taxes and deductions)

A. All Adult Household Members (Anyone who is living with you and shares income and expenses, even if not related, including you.)

List all Adult Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they receive income, report total gross income (before taxes and deductions) for each source in whole dollars (no cents) only. If they 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.

Name of Adult Household Members (First and Last)	Earnings from Work	How often received? Weekly	Every 2 Weeks	2x Month	Monthly	Annual	Public Assistance, Child Support, Alimony	How often received? Weekly	Every 2 Weeks	2x Month	Monthly	Pensions, Retirement, Social Security, SSI, VA Benefits, All Other	How often received? Weekly	Every 2 Weeks	2x Month	Monthly
	$	○	○	○	○	○	$	○	○	○	○	$	○	○	○	○
	$	○	○	○	○	○	$	○	○	○	○	$	○	○	○	○
	$	○	○	○	○	○	$	○	○	○	○	$	○	○	○	○
	$	○	○	○	○	○	$	○	○	○	○	$	○	○	○	○
	$	○	○	○	○	○	$	○	○	○	●	$	○	○	○	○

Required: Total Household Members (Children and Adults) ☐

Required: Last Four Numbers of Social Security Number (SSN) of Primary Wage Earner or Other Adult Household Member or Check Box if No SSN ☐☐☐☐ Check Box if No Social Security Number ☐

Please see application's back for list of income sources.

B. Child Income

Sometimes children in the household earn or receive income.
Include the TOTAL income (before taxes and deductions) received by ALL children listed in STEP 1 here.

Child Income $ ☐ How often received? ○ Weekly ○ Every 2 Weeks ○ 2x Month ○ Monthly ○ Annual

STEP 4 Contact information and adult signature. RETURN COMPLETED FORM TO YOUR CHILD'S SCHOOL: Insert school address here

"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 (confirm) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws."

Print Name of Adult Signing the Form | **Required**: Signature of Adult | Today's Date

Mailing Address (if available) | City | State | Zip | Phone (optional) | Email (optional)

Return completed form to your child's school.

SOURCES AND EXAMPLES OF INCOME

For additional information on income, please refer to the instructions that accompany this application.

Sources of Income			Examples of Income for Children
Earnings from Work	**Public Assistance/Alimony/ Child Support**	**Pensions/Retirement/ All other sources of income**	
• Salary, wages, cash bonuses, tips, commissions • Net income from self-employment (farm or business) **If you are in the U.S. Military:** • Basic pay and cash bonuses (do NOT include combat pay, FSSA, or privatized housing allowances) • Allowances for off-base housing, food, and clothing	• Unemployment benefits • Workers' compensation • Supplemental Security Income (SSI) • Cash assistance from State or local government • Alimony payments • Child support payments • Veterans benefits • Strike benefits	• Social Security/Disability (including railroad retirement and black lung benefits) • Private Pensions or disability benefits • Income from trusts or estates • Annuities • Investment income • Earned interest • Rental income • Regular cash payments from outside household	• A child has a regular full or part-time job where they earn a salary or wages • A child is blind or disabled and receives Social Security benefits • A parent is disabled, retired, or deceased, and their child receives Social Security benefits • A friend or extended family member regularly gives a child spending money • A child receives regular income from a private pension fund, annuity, or trust

OPTIONAL

Children's ethnic and racial identities. This information is kept confidential and may be protected by the Privacy Act of 1974.

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.

Ethnicity (check one): ☐ Hispanic or Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish Culture or origin, regardless of race) ☐ Not Hispanic or Latino

Race (check one or more): ☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White

Return this completed form to your child's school. *Do not mail, fax, or email completed applications to the U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights.

DO NOT FILL OUT

For school use only. If all students listed on this application attend CEP schools, the processing of this application cannot be paid for by the nonprofit school food service account.

Annual Income Conversion: Weekly × 52, Every 2 Weeks × 26, Twice a Month × 24, Monthly × 12. Do not annualize income to determine eligibility unless more than one income frequency is listed.

Total Income

How often?

Weekly	Every 2 Weeks	2x Month	Monthly	Annual
○	○	○	○	○

Household size

Categorical Eligibility ☐

Eligibility

Free	Reduced	Denied
○	○	○

Determining Official's Signature | Date | Confirming Official's Signature | Date | Verifying Official's Signature | Date

Use of Information Statement

The Richard B. Russell National School Lunch Act requires that we use information from this application to see who qualifies for free or reduced price meals. We can only approve complete forms. We may share your eligibility information with education, health, and nutrition programs to help them deliver program benefits to your household. Inspectors and law enforcement may also use your information to make sure that program rules are met.

Please be sure to provide the last four numbers of the Social Security number of the adult household member who signs the application. If the adult does not have one, 'Check if no Social Security Number' Applications for a foster child do not need to list a Social Security number. Applications for children in households receiving Supplemental Nutrition Assistance Program (SNAP) or Temporary Assistance for Needy Families (TANF) or Food Distribution Program on Indian Reservations (FDPIR) do not need to list a Social Security number. Some children qualify for free meals without an application. Please contact your school to get free meals for a foster child, and children who are homeless, migrant, or runaway.

The contact information below is solely to file a complaint of discrimination

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/ad-3027.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:

*MAIL: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410

FAX: (833) 256-1665 or (202) 690-7442; or
EMAIL: program.intake@usda.gov

***Do not mail applications to this address, only complaints of discrimination.**

Return completed form to your child's school.

This institution is an equal opportunity provider.