

**ALBEMARLE COUNTY PUBLIC SCHOOLS
CHILD NUTRITION PROGRAM
2025-26 LETTER TO HOUSEHOLDS**

Dear Parent or Guardian:

Children need healthy meals to learn. Albemarle County Public Schools offer nutritious and reasonably priced meals each school day. Students in elementary school pay \$3.45 for lunch. Middle and High School students pay \$3.65. The cost of school breakfast is \$2.00. For the school year 2025-26, the cost of reduced-price meals is being waived; therefore, students approved for reduced-price meals will not have to pay. Meals may be prepaid on a weekly, monthly or longer basis. All meals served must meet standards established by the U.S. Department of Agriculture. If a child has been determined by a doctor to be disabled and the disability prevents the child from eating the regular school meal, the school will make substitutions prescribed by the doctor. If a substitution is needed, there will be no extra charge for the meal. If your child needs substitutions because of a disability, please contact us for further information.

This Paragraph describes various scenarios that will qualify students for free or reduced meals. PLEASE note those qualifying eligibilities ARE NOT AUTOMATIC and AN APPLICATION MUST be processed by the Child Nutrition Program for the eligibility to take effect. Children who are members of households receiving Supplemental Nutrition Assistance Program (SNAP) benefits or receive Temporary Assistance for Needy Families (TANF) are eligible for free meals regardless of income. Foster children who are the legal responsibility of a welfare agency or court are eligible for free meals regardless of the income of the household with whom they reside. Students who are eligible for Medicaid may also be eligible for free or reduced-price meals based on the household's income. Children who are members of households participating in WIC may also be eligible for free or reduced-priced meals based on the household's income. If your total household income is at or below the Federal Income Eligibility Guidelines, shown on the chart below, your child(ren) may get free meals or reduced-price meals. Your child(ren)'s application from last school year is only good for the first few days of this school year.

YOU MUST SUBMIT A NEW HOUSEHOLD APPLICATION FOR EACH SCHOOL YEAR

HOW TO APPLY

If your child is automatically qualified, you will receive a letter from the Child Nutrition Office. If you feel your child qualifies and have not received a letter, then please submit an application. **We encourage families to apply online**, as this method processes applications at a faster rate and is offered in various languages at the click of a button. The application must contain the names of all students in the household, the SNAP or TANF case number, and the signature of an adult household member.

If you do not list a SNAP or TANF case number for the child(ren) you are applying for, then the application must have the names of all students, the names of **ALL** household members, and the amount and frequency of income each person received last month. An adult household member **must sign the application** and include the last four digits of the social security number. If the person does not have a social security number, check the box provided indicating none. You or your child (ren) do not have to be U.S. citizens to qualify for free or reduced-price meals.

If you are applying for a foster, homeless, migrant or runaway child, please check the appropriate box on the application and contact (434) 296-3872 for more information.

FEDERAL INCOME GUIDELINES: Your child(ren) may be eligible for free meals or meals at a reduced price if your household income is within the limits on the Federal Income Eligibility Guidelines chart shown above.

INCOME CHART For Free or Reduced-Price Meals			
Effective July 1, 2025 to June 30, 2026			
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
For Each Additional Family Member Add	\$10,175	\$848	\$196

****An application that is not complete cannot be approved.**

****An application that is not signed is not complete.**

****You must send in ONE new application each school year per household.**

OTHER BENEFITS: Your child(ren) may also be eligible for benefits such as the Virginia children's health insurance program called Family Access to Medical Insurance Security (FAMIS) and/or Medicaid. **The law allows the school division to share your free or reduced-price meal eligibility information with Medicaid and FAMIS.** These programs can only use the information to identify children who may be eligible for free or low-cost health insurance, and to enroll them in either Medicaid or FAMIS. These agencies are not allowed to use the information from your free or reduced-price meal application for any other purpose. Medicaid officials or officials with FAMIS may contact you to get more information. You are not required to allow us to share this information with Medicaid or the FAMIS program. Your decision will not affect your children's eligibility for free and reduced-price meals. If you do not want your information shared please check

the appropriate box on the Free and Reduced-Price Meal Application. You may qualify for other assistance programs. To find out how to apply for SNAP or other assistance programs, contact the local social service office in your area.

Your child(ren) may be eligible for other benefits provided by the school division or in the community. The programs listed in section 6b) may or may not be available at your child's school. Checking the box does not sign you up for the benefit. It provides your consent to our program to release names if those organizations request.

- Community Programs/Services – Toy Lift
- Academic Programs/Services –Athletic Fees, Testing Vouchers

Please note: without parental consent on the Free and Reduced Meal Application, the Child Nutrition Program cannot refer your family for these services. Your decision about these other benefits will not affect your child's eligibility for free and reduced priced meals. Please indicate a YES for this referral process by checking the appropriate box in the "other benefits" section of the Free and Reduced Meal Application.

CONFIDENTIALITY AND NOTICE OF DISCLOSURE: School officials use the information on the application to determine if your child is eligible to receive free or reduced-price meals and to verify eligibility. As authorized by the National School Lunch Act, the school division may inform officials connected with other child nutrition, health, and education programs of the information on your application to determine benefits for those programs or for funding and/or evaluation purposes.

VERIFICATION: Your eligibility may be checked at any time during the school year. School officials may ask you to send information proving that your child(ren) should receive free or reduced-price meals.

FAIR HEARING: If you do not agree with the decision on your application or the results of verification, you may wish to discuss it with the school nutrition office at 434-295-0566. If you wish to review the final decision on your application you also have the right to a fair hearing. You can request a hearing by calling or writing: **Ms. Rosalyn Schmitt, Chief Operations Officer, Support Services Department, 401 McIntire Road, Charlottesville, VA 22902, (434) 296-5877.**

REAPPLICATION: You may reapply for free and reduced-price meals any time during the school year. If you are not eligible now but have a change, such as a decrease in household income, an increase in household size, become unemployed or get SNAP or TANF for your child(ren), fill out an application at that time.

IF YOU NEED HELP FILLING OUT THE APPLICATION FORM, PLEASE CONTACT THE CHILD NUTRITION PROGRAM, (434) 295-0566 o con la oficina de inglés para hablantes de otros idiomas (ESOL), (434) 296-6517. You will be notified in writing when your child's application is approved or denied. The school cafeteria which your child(ren) attends will also be notified electronically of the approval or denial.

Sincerely,
Christina Pitsenberger, Director

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
3. **email:**
program.intake@usda.gov

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