CAMBRIDGE PUBLIC SCHOOLS
EMPOWERING STUDENT EXCELLENCE

Controlled Choice Form

Voluntary Disclosure of Eligibility for Free/Reduced Price Meals for the Purpose of School Assignment

FORM 4

The CPS Controlled Choice Plan's primary purpose is to create a student body that reflects the diversity of the City in all of our schools. We diversify our schools on the basis of socioeconomic status (SES), as measured by the percentage of students who would and would not qualify for the federal Free or Reduced Price Meals Program.

When registering for school, you are asked to complete this Controlled Choice Form. Your answers help us determine in which assignment category your child's registration belongs: Free/Reduced Lunch (F/R) or Paid Lunch. The information is solely used for the purpose of making school assignments in accordance with the SES percentages for each assignment category as defined in the Controlled Choice Plan.

Currently, CPS operates under the Community Eligibility Program (CEP) and complete meals are available at no cost to all students, eliminating the collection of free and reduced meals applications; however, through Controlled Choice, our SES assignment categories remain based on the income eligibility guidelines for the Free or Reduced Price Meals Program.

Please refer to the chart titled, "Federal Eligibility Income Chart" at the bottom of this page and indicate yes, no, or that you decline to answer.

- ☐ **Yes** – I am eligible for free or reduced price meal benefits.
- ☐ **No** – I am not eligible for free or reduced price meals benefits.
- ☐ I decline to disclose this information.

I acknowledge and agree to release to the Cambridge Public Schools' Student Registration Center **all information on this form**. I acknowledge and agree that the Cambridge Public Schools' Student Registration Center may use this information to help determine the school assignment for my child. I understand that I am not required to release this information. I understand that if I elect not to release this information, the Cambridge Public Schools' Student Registration Center will consider my child non-eligible for free and reduced price meals when using this information to help determine the school assignment for my child.

I have read this release and understand its terms and signed it voluntarily.

Parent/Guardian Name: _____ Student Name: _____

Signature: _____ Date: _____

FEDERAL ELIGIBILITY INCOME CHART FOR SCHOOL YEAR 2026-2027

Household Size	Yearly	Monthly	Weekly
1	$29,526	$2,461	$568
2	$40,034	$3,337	$770
3	$50,542	$4,212	$972
4	$61,050	$5,088	$1,175
5	$71,558	$5,964	$1,377
6	$82,066	$6,839	$1,579
7	$92,574	$7,715	$1,781
8	$103,082	$8,591	$1,983
Each additional family member	$10,508	$876	$203