Colorado Springs District 11
Sharing Free and Reduced Price School Meal
Information with Other Programs
School Year 2026-2027

Dear Parent/Guardian:

If you received notification that your student(s) qualified for free or reduced-price school meals, this information may be shared with the school/district to waive certain school/district program fees you might otherwise be required to pay.
The school/district is not permitted to share your information without your consent. You are not required to consent to the release of your information; this will not affect your student(s) eligibility for school meals. However, sharing this information may qualify your family for the waiver of certain other program fees.

Return this completed and signed form to: 5260 Geiger Blvd, Colorado Springs, CO 80915 or e-mail to schoolmeals@d11.org.

- ❑ Yes! I **DO** want school officials to share my information with **Advanced Placement (AP) Exam and/or Book Fees.**
- ❑ Yes! I **DO** want school officials to share my information with **Accelerate College Opportunity Exam and/or Book Fees**.
- ❑ Yes! I **DO** want school officials to share my information with **School Registration Fees.**
- ❑ Yes! I **DO** want school officials to share my information with **School Athletic Fees.**
- ❑ **DO NOT** share my information with any programs.
- ❑ **DO NOT** share my information with Medicaid/SCHIP offices.

If you marked any or all of the boxes above, complete the section below to ensure that your information is shared for the students in your household. Your information will be shared only with the programs you checked.

Student's Name: _____ School: _____

Student's Name: _____ School: _____

Student's Name: _____ School: _____

Student's Name: _____ School: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Mailing Address: _____

For more information, you may call Laurie Hylle at 520-2934 or e-mail schoolmeals@d11.org.

Non-discrimination Statement: 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:
mail:U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; or fax:(833) 256-1665 or (202) 690-7442; or email: program.intake@usda.gov

This institution is an equal opportunity provider.