

Permission to Share Free or Reduced Meal Status with other Student Programs

If you would like your children to participate in Campbell County School District No. 1 fee-based programs on a free or reduced fee basis you must provide written consent allowing staff to share information about your child's eligibility status.

This form is **voluntary** and **will not affect** your child's eligibility for meal benefits.

By completing this form, you authorize the school to disclose your child's eligibility status for free or reduced-price meals only to designated programs that assess fees for the purpose of determining eligibility for fee waivers or reductions.

Only your child's **name** and **benefit status** will be shared. No financial or additional personal information will be disclosed.

☐ **NO!** I DO NOT want my children's eligibility status in the federal Free & Reduced-Meal program shared.

YES! I DO want my children's eligibility status in the federal Free & Reduced- Meal program shared with each of the following programs and /or activities.

(Please check all that apply)

- ☐ Instrument Rental
- ☐ Activities Fees
- ☐ AP Testing
- ☐ ACT Testing

If you checked **YES** to any program or activity above, fill out the form below. Your status for the listed student(s) will be shared with these programs.

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Signature of Parent/Guardian: _____ **Date:** _____

Printed Name: _____

For more information, you may call Judith at 687-4544. **Return this form to:** your child's school or to Campbell County School District's Finance Office, 1000 W Eighth Street or mail to the Finance Office at P.O. Box 3033, Gillette WY 82717-3033