

June 8, 2018

SHARING INFORMATION WITH OTHER PROGRAMS

Dear Parent/Guardian:

To save you time and effort, the information you gave on your Free and Reduced Price School Meals Application may be shared with other programs for which your children may qualify. **For the following programs, we must have your permission to share your information. Sending in this form will not change whether your children get free or reduced price meals.**

- ☐ No! I **DO NOT** want information from my Free and Reduced Price School Meals Application shared with any of these programs.

If you checked no, stop here. You do not have to complete or send in this form. Your information will not be shared.

- ☐ Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with school officials for **school fee waivers or reductions for program such as laptops and summer school.**
- ☐ Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with school officials for **school fee waivers or reductions for field trips and extracurricular activities.**
- ☐ Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with

(Please write in specific program details).

If you checked yes to any or all of the boxes above, fill out the form below to ensure your information is shared for the child(ren) listed below. Your information will be shared only with the programs you checked.

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____ Relation to Student: _____

Address: _____

For more information, you may call **Nutrition Services at (540) 563-3900 ext. 10210.**