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Office for Prekindergarten through Grade 12 Education

Child Nutrition Program Administration

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TO: District Superintendents

Superintendents of Schools

Chancellor, New York City Department of Education

Chief Administrative Officers of Nonpublic Schools Participating in the

School Lunch, Breakfast, or Special Milk Programs

Executive Directors of Residential Child Care Institutions

School Food Service Directors/Managers

FROM: Paula Tyner-Doyle, Coordinator

SUBJECT: 2017-2018 Free and Reduced Price Income Eligibility and Policy Information

**PLEASE READ CAREFULLY**

The 2017-2018 Free and Reduced Price Income Eligibility and Policy Information Booklet announces the income eligibility guidelines for the 2017-2018 school year and provides each School Food Authority (SFA) with the forms and guidance needed to process applications for free and reduced price meals and/or milk. Many of these forms are on the Child Nutrition Knowledge Center (CNKC) website in Word document format for your convenience.

**This packet reiterates the most recent information needed to make eligibility determinations. Webinars are available on the CNKC website that address the application and eligibility process. These Webinars count toward annual training for Professional Standards.**

**SFAs should also refer to the July 2017 USDA Eligibility Manual for School Meals for information regarding determining and verifying eligibility. The July 2017 USDA Eligibility Manual for School Meals can be found on the CNKC website.**

**KEEP THIS BOOKLET ON FILE**: Retain with copies of the public release, application form, and parent letter(s) used by your district/school for free or reduced price meal and/or milk benefits during the 2017-2018 school year.

**Foreign Language Applications and Letters**

An application and parent letter in Spanish is included in this booklet and on the CNKC website. Prototype copies of applications are also available through USDA in many translated foreign languages. Each foreign language packet downloaded from USDA contains a letter to households, a free and reduced price application and instructions, a notice to households of approval/denial of benefits, a notice of Direct Certification, a waiver for information for health insurance, a verification selection letter to parents and a verification letter of results and adverse action. These can be downloaded from USDA’s web site at <http://www.fns.usda.gov/cnd/Application/translatedapps.html>.

**TABLE OF CONTENTS**

Common Errors 4

Recent Updates 5-6

Introduction 7

Public Outreach Requirements 8

Carryover of Eligibility/Transfer of Eligibility……………………………………………………………………………………..9

Household Applications 10

Categorical Applications 12

Other Source Categorical Eligibility 13

Direct Certification/Direct Certification Matching Process 15

Effective Date of Eligibility……………………………………………………………………………………………………….16

Notification of Eligibility 18

Special Situations 18

Administrative Prerogative Questions and Answers 20-21

Policy Statement for Free and Reduced Price Meals or Free Milk 22-27

Disclosure Chart 28

Child Nutrition Eligibility Guide 29

Free and Reduced Price Policy Summary of Attachments 30

Child Nutrition Staff Listing 56

**ATTACHMENTS**

I Income Eligibility Guidelines for Free and Reduced Price Meals or Free Milk 31

II Annual News Release - Public Announcement 32-33

III Certification of Acceptance for Districts and Nonpublic Schools 34

IV Certification of Acceptance for Residential Child Care Institutions (RCCIs) 35

Va Application for Free and Reduced Price School Meals/Milk (Household Application English) 36-37

Vb Application for Free and Reduced Price School Meals/Milk (Household Application Spanish) 38-39

VI Free and Reduced Price Meal Application Fact Sheet 40

VII Letter to Parents for School Meal Program 41-43

VIII Letter to Parents for School Meal Program– Spanish.........................................................................44-46

IX Letter to Parents for Special Milk Program 47-48

X Notification Letter for School Meals 49

XI Notification Letter to Parents from Direct Cert Matching Process 50

XII Notification Letter to Parents from Direct Cert Matching Process– Spanish. 51

XIII Parent Letter for Meal Services to Children with Disabilities 52

XIV Parent/Guardian Consent to Release Eligibility Information

 For Free and Reduced Meals or Free Milk 53

XV Consent to Release Free/Reduced Price Eligibility Information (Single Programs) 54

XVI Consent to Release Free/Reduced Price Eligibility Information (Multiple Programs) 55

 CN Staff Listing .56

**Common Errors**

**(u*se the prototype forms and letters enclosed in this booklet***

***or the Word documents on the CNKC website to avoid many of these errors)***

* **Inappropriate outdated application forms**

All SFAs must use New York State’s current English or Spanish application. For school year 2017-2018, the applications are enclosed and can also be found at [www.cn.nysed.gov](http://www.cn.nysed.gov) . If applications are made available on the school website, be sure to update with the new applications and parent letters each year.

* **Inappropriate headings**

The free/reduced price application must include the proper heading which indicates its purpose. It cannot be labeled as a “reduced fee” application for alternate purposes if it establishes eligibility for free/reduced price meals.

* **Parent letter not included or wrong income scale used**

Parents must receive together, the Free and Reduced Price Meal application and the required parent letter (Attachment VII) that includes **only the reduced price income eligibility scale**. Parent letters incorrectly containing both income eligibility scales (excluding Special Milk, which requires only the free income eligibility scale), only the free income eligibility scale, or no income eligibility scale jeopardize free and reduced reimbursement to your SFA.

* **Public announcement errors**

Many schools fail to send the public announcement each year to the informational media (local newspaper), the local unemployment office, and any major employers contemplating large layoffs in the area. The required income eligibility scales are included in the prototype public announcement (Attachment II). **Please note that this public announcement may not be published on the school’s website.**

* **School website issues**

Applications on the school website are not kept current each year. Be sure the website is updated with the current application and the current parent letter. **The public announcement which includes both the free and reduced price income eligibility scales may never be posted on the website or in the news feed.**

It is essential that you understand there will be no exceptions to these policies. SFAs that are not in compliance could find their applications for free and reduced price meals disallowed and may incur additional printing, dissemination and approval costs to bring their programs into compliance.

Ensure everyone connected with the application process for free and reduced price meals is fully aware to ensure compliance with all required policies.

 **Recent Updates**

* **NEW Direct Certification Matching Process (DCMP):** To provide increased access to free meals to children entitled to free meal benefits and allow for more accurate reporting, better policy and decision making at the local, State and federal levels, the Child Nutrition Program Administration (CNPA) has developed a new Direct Certification Matching Process (DCMP).

**The DCMP process through the Child Nutrition Management System (CNMS) is being phased out over the 2017-18 school year with enhanced capabilities made available through the new State Match System and related business applications.**

The new State Match feature provides users with access to direct certification (DC) data (e.g., SNAP and Medicaid lists) and to DC data that has been matched to New York State student records through the New York State Student Identification System (NYSSIS).

The NYSSIS system is already in-use by school personnel responsible for assigning unique IDs to students. NYSSIS uses a sophisticated matching engine to identify duplicate student records and discourage the creation of multiple student IDs for the same child. The engine is also being used behind the scenes by the State Match system to match DC records to student records maintained in the NYSSIS system. State Matching is a USDA best practice as it relieves School Food Authorities (SFAs) from having to match at the local level. Rather than DC data alone, the State Match system will deliver to SFAs student identifiers (e.g., a local ID and a NYSSIS ID) appended to DC data for easy import into food service management or other local student information systems.

\* The NYSSIS system and State Match capabilities are available on the NYSED Web site, at the NYSED Application Business Portal (<https://portal.nysed.gov/abp>).

All SFAs are required to complete the online DCMP process a **minimum of three times a year**. The new system will process DC data monthly; therefore, SFA’s are encouraged as a best practice for DCMP to access the data more frequently to ensure that children entitled to free meal benefits receive them. DCMP users will be required to certify that this information will remain confidential in compliance with the disclosure statement provided. The online DCMP will help reduce the waste from paper applications and the burden on low income households to return applications. The DCMP is intended to certify all eligible students receiving SNAP and certain Medicaid eligibles (determined by the Medicaid Administering Agency at or below 133 percent of the Federal poverty guidelines before the application of blocks, exceptions or disregards).

More information on Direct Certification can be found further in this booklet and on the Child Nutrition Knowledge Center (CNKC) website.

* **Meal Charge Policy:** Beginning with school year 2017-2018, School Food Authorities (SFAs) in New York State are required to have a written and clearly communicated policy to address student meal charges when payment cannot be collected at the point of service.  Charge policies should be reasonable, well-defined and maintain the integrity and dignity of students and households to minimize harm to the student. **SFAs should refer to the memo titled “Student Meal Charge Policy” for additional information and guidance documents. The memo can be found on the CNKC and at the following link:** <http://www.cn.nysed.gov/content/student-meal-charge-policy>
* **Flexibility in Determining the Effective Date for Children receiving free or reduced price benefits- see page 16**
* **School Breakfast Program (SBP) Outreach:** SFAs participating in the School Breakfast Programmust actively promote and perform outreach activities to increase awareness of the School Breakfast Program and increase participation. Efforts should be documented and kept on file with Program records for three years plus the current school year.
* **Summer Food Service Program (SFSP) Outreach:** SFAs participating in the School Breakfast Program and/or National School Lunch Programs must notify families of locations that operate the Summer Food Service Program (SFSP) prior to the end of the school year. SFAs should provide the toll free number for families to call (3-1-1 or text 877-877) to find a location that operates the SFSP and direct families to the Child Nutrition Knowledge Center (CNKC) website. Efforts should be documented and kept on file with Program records for three years plus the current school year.
* **Zero Income:** Applications where the family has reported zero (0) income must be given free meal benefits for the entire school year from the time the application was received and approved. Any income field left blank is a positive indication of no income and certifies there is no income to report.
* **Community Eligibility Provision (CEP):** Schools where at least 40 percent of enrolled students have been deemed free eligible through a means other than an income application (i.e., directly certified using electronic SNAP or Medicaid data, homeless, migrant, runaway, foster, and head start) as of April 1, 2017, may participate in the Community Eligibility Provision for the 2017-2018 school year. The schools will receive reimbursement in the free and paid category based on the percentage of directly certified students as noted above times a multiplier (as written in federal regulation, currently 1.6). For more details about participation and how to apply, please see the CEP Memo on the CNKC website. **Deadline to apply to participate in the 2017-2018 school year was June 30, 2017**
* **USDA Nondiscrimination Statement:** The revised 2015 Nondiscrimination Statement must be used on all Child Nutrition Program materials, including websites, pamphlets, brochures and all correspondence sent to families for program purposes. The USDA Nondiscrimination Statement must include all spacing as it appears in the memo “Compliance Dates for Updated Nondiscrimination Statement for Use on Child Nutrition Program Materials and the “And Justice for All” posters” on the Child Nutrition Knowledge Center (CNKC) website.
* **Civil Rights Requirements and Annual Training:** SFAs participating in the National School Lunch and School Breakfast Programs are required to collect data of all potential participants with regard to race and ethnicity specifically. The data already being collected as a requirement of the No Child Left Behind Act may also be used for the National School Lunch and School Breakfast Programs. The civil rights compliance report form is available on the Child Nutrition website detailing the specific annual requirements.

Annual Civil Rights training must be provided by the SFA for all staff, including front line cafeteria staff who interact directly with program applicants and participants.  A Power Point presentation is available on the Child Nutrition Knowledge Center (CNKC) website for staff training.  A record of the annual training, including a sign-in sheet, the date, location, and who provided the training, must be kept for three years plus the current year.

LEAs must comply with all Civil Rights and non-discrimination requirements in Subpart A and FNS Instruction 113-1.

* **Change in Authorizing Signature:** There is no federal requirement that describes who must sign Child Nutrition Program documents. The Child Nutrition Program regulations specify that an official of the SFA make written application to the state agency for any school in which it desires to operate the program. The SFA means the governing body responsible for the administration of one or more schools and the legal authority to operate Child Nutrition Programs.

The signature of the district clerk, as well as an officer of the board of education, such as president or vice president, is accepted for the forms.

The board of education may delegate the chief administrative officer to act as its agent with regard to entering into contracts and agreements for the Child Nutrition Programs. This policy will not permit the chief administrative officer’s signature in lieu of board action, but will permit the chief administrative officer to sign, in all respects, after the board resolution.

**Introduction:**

All schools participating in the federally assisted National School Lunch Program and/or School Breakfast Program **must** make free and reduced price meals available to all eligible children. All schools and institutions participating in the free milk option of the Special Milk Program must make free milk available to eligible children. No person shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under the Child Nutrition Programs [7 CFR 15.1].

The State Education Department annually issues this free and reduced price policy booklet to all SFAs to assist in the correct implementation of these program requirements.

The 2017-2018 free and reduced price policy booklet consists of:

* the Policy Statement;
* information regarding the approval of household applications;
* direct certification information;
* the income eligibility guidelines as issued by the United States Department of Agriculture:
* prototype public release;
* free and reduced price meal applications and instructions in English and Spanish;
* prototype parent letters regarding school meals, food substitutions for children with disabilities, and disclosure.

SFAs must have new certification documentation on file within the first 30 operating days of the school year. This applies to all schools, even those whose school year begins in July. Carryover of previous year’s eligibility from direct certification, categorical eligible and income applications is for up to 30 operating days of the new school year.

We recommend you immediately conduct the Direct Certification Matching Process (DCMP), then begin contacting families as soon as possible to obtain current eligibility data to ensure access to all children who qualify. This would also assist you in your efforts to provide information on free and reduced price eligible students on the Basic Educational Data System (BEDS) report in early October. As you are probably aware, BEDS data is used for a variety of funding formulas that will affect your school and community.

**Record Retention:**

All eligibility determinations, including Direct Certification Matching Process (DCMP) lists, Supplemental Nutrition Assistance Program (SNAP) and household applications, must be retained for three years plus the current year. If this documentation is lost, misplaced, damaged, etc., the SFA could lose reimbursement for free and reduced price meals.

**Policy Statement:**

The Policy Statement sets forth the conditions that must be followed for the SFA to maintain participation in the Breakfast, Lunch, or Special Milk Programs and must be officially adopted each year. Completion of the Certification of Acceptance (Attachments III or IV) acknowledges the SFA's adoption of this Policy Statement. The SFA must keep this signed Policy Statement on file with all Child Nutrition Program documents. **The Policy Statement can be found in this booklet.**

**Certification of Acceptance:**

The Certification of Acceptance form must be completed annually (Attachment III or IV) and maintained on file for three years plus the current year. The Certification of Acceptance must be completed each year on the Child Nutrition Management System (CNMS) as part of the annual renewal process. The Certification of Acceptance requires the SFA to indicate the SFA’s reviewing official, verification official and hearing official. **Submission of the Certification of Acceptance through the annual renewal process acknowledges the SFA’s adoption of the Policy Statement.**

**Disclosure:**

The information provided by families on the free and reduced price application should be used only for determining eligibility for meal or milk benefits and verification of eligibility. SFAs that plan to disclose children’s eligibility status for purposes other than determining and verifying free or reduced price eligibility must inform households of this potential disclosure. In some cases, the SFA must obtain consent of a parent or guardian prior to the disclosure. SFAs should refer to the Disclosure Chart included in this booklet and refer to the USDA Eligibility Manual for School Meals for additional information.

**Public Outreach Requirements:**

**Public Announcement:**

Near the beginning of each school year, the public must be notified that free and reduced price meals or free milk (if participating in the Special Milk Program) are available. This notice must include the eligibility criteria for free and reduced price meals or free milk.

The public announcement must be provided to the local news media, the unemployment office, and to any major employers who are contemplating large layoffs in the attendance area of the school. SFAs must keep a record on file for three years plus the current year identifying where the public release was sent.

The prototype public announcement that contains the required information that must be used by SFAs is included in this booklet.

\*Note- the public announcement must contain both the free and reduced price income eligibility scales. The public announcement may not be sent directly to families and may not be posted on the school website.

In addition to the required notification at the beginning of the school year, SFAs are strongly encouraged to share information about the availability of school meals in routine contacts throughout the school year.

**Parent Letter:**

At the beginning of school, a parent letter must be distributed to the households of children attending the school. This letter informs families of the Child Nutrition Programs and that free or reduced price meals or free milk may be available to children. An application form and instructions must be included with the parent letter.

The parent letter and application must be sent to households of all school children before the beginning of the school year or as early as possible in the school year so that eligibility determinations may be made and free and reduced price benefits provided as soon as possible. SFAs should send out the letter no earlier than four calendar weeks prior to the first day of school. Normally this would be around August 1 in New York State for schools beginning in September. Letters cannot be sent home at the end of the school year (May/June) for the next year.

The letters may be distributed by the postal service, e-mailed to the parent or guardian, or included in an information packet provided to students.

The prototype parent letter that contains the required information and should be used by SFAs is included as an attachment in this booklet.

If the SFA uses a computer or web-based system to process applications, the letter must inform the household how to access the system to apply for benefits. It must also explain how the household can obtain a paper application.

Households enrolling new students in an SFA after the start of the school year must be provided an information letter, application, and materials when they enroll, and the SFA must determine eligibility promptly.

\*Note- **the parent letter must only contain the reduced price income eligibility scale**. Parent letters incorrectly containing both the free and reduced price income eligibility scales (excluding Special Milk, which requires only the free eligibility scale), only the free income eligibility scale, or no income eligibility scale jeopardize free and reduced reimbursement to your SFA.

**Additional Outreach Requirements:**

SFAs must ensure that communication with applicants, participants, members of the public, and companions with disabilities are as effective as communications with people without disabilities through the provision of auxiliary aids and services, such as alternative formats, taped text, audio recordings, Brailed materials, large print and sign language interpreters [28 CFR 35.160].

SFAs also must take reasonable steps to ensure meaningful access to their programs and activities by persons with Limited English Proficiency.

**Carryover of Previous Year’s Eligibility:**

Carryover for purposes of the Child Nutrition Programs refers to a child’s eligibility from the previous school year being carried over into the current or new school year. A student’s eligibility from the previous school year (before July 1) carries over for up to 30 operating days into the new school year, or until a new eligibility determination is made, whichever comes first. The 30 operating days begins on the first operating day of school. Carryover applies to eligibility established through a household application or through direct certification. The SFA may not have a carryover period of less than 30 operating days.

Carryover allows students to continue receiving school meal benefits while families complete and submit, and schools process, applications. However, the carryover period is not intended to allow schools to delay processing of applications. Instead, schools must process applications as they are received and promptly notify the household of their eligibility status. Please note that eligibility determinations and household notifications must be made within 10 operating days.

**Carryover Within an SFA:**

Carryover of eligibility within an SFA is mandatory, whether a child is continuing in the same school or will attend a different school within the same SFA. The SFA may not have a carryover period of less than 30 operating days, unless a new eligibility determination is made. When a student moves to a new school within an SFA, the SFA must carry over eligibility for free or reduced price benefits.

**Carryover Between SFAs:**

When children move to a new SFA, either at the beginning of the new school year or during the summer months, the new SFA is encouraged to use the former SFA’s eligibility determination from the previous school year and carry over the child’s eligibility status. SFAs opting to do this can use the former SFA’s eligibility determination for up to 30 operating days, or until a new eligibility determination is made, whichever comes first.

**Transfer of Eligibility:**

**Transfer of Eligibility within an SFA:**

When a child transfers to a new school within the same SFA, the new school must accept the eligibility determination from the child’s former school, if the child has an individual eligibility determination.

A child that transfers within the same SFA from a Provision 2 or Community Eligibility Provision (CEP) school to a non-Provision school must be given free reimbursable meals for up to 30 operating days or until a new eligibility determination is made, whichever comes first.

**Transfer of Eligibility between SFAs:**

Transferring the eligibility determination between SFAs ensures that qualifying students continue to receive school meal benefits as they transition to new schools, and avoids the possibility of unpaid meal charges.

When a student transfers to a new SFA, the new SFA is permitted to accept the eligibility determination from the student’s former SFA. SFAs and schools are strongly encouraged to accept the former SFA’s eligibility determination to ease the new student’s transition and ensure there is no break in the student’s meal access. The new SFA should retain written documentation of the eligibility determination made by the former SFA. An email from the former SFA stating the eligibility status is sufficient.

While the new SFA is not liable for the accuracy of the former SFA’s determination, the accepting SFA should review the application for arithmetic errors and compare the income and household size to the applicable Income Eligibility Guidelines to ensure that the correct level of benefits had been assigned. If the accepting or new SFA determines that an arithmetic error occurred, the accepting SFA must notify the household that they must submit a new application in order to determine benefits. Additionally, if the child’s eligibility status is determined to be incorrect during an Administrative Review or as part of verification, the child’s eligibility status would change.

A child that transfers between SFAs from a Provision 2 or Community Eligibility Provision (CEP) school to a non-Provision school must be given free reimbursable meals for up to 30 operating days or until a new eligibility determination is made, whichever comes first.

**Income Eligibility Guidelines:**

The current Income Eligibility Guidelines must be used for the Child Nutrition Programs (CNPs) for determining eligibility for free and reduced price meals and free milk and are based on the federal income poverty guidelines by household size. **The 2017-2018 Income Eligibility Guidelines can be found on page 31 of this booklet.**

The free and reduced income eligibility scales must be used for eligibility determinations and must be included in the public release that must be sent to the local newspaper, the local unemployment office, and to any major employer contemplating large layoffs in the area.

Only the reduced price income eligibility scale may accompany the parent letter and application in those schools participating in the National School Lunch Program and/or School Breakfast Program. Including the free income eligibility scale with the parent letter and application will result in the SFA being ineligible to receive free reimbursement.

**The free income eligibility scale may not be posted on the school website or printed in any school publication.** SFAs in non-compliance would have to reissue the parent letter with the proper scale and application form and verify all reissued applications to receive free reimbursement for the balance of the school year.

**Household Applications:**

SFAs must provide household applications to families applying for free or reduced price meals or free milk benefits, unless the household has been directly certified. The prototype 2017-2018 Application for Free and Reduced Price School Meals/Milk that should be used by SFAs is included as an attachment in this booklet.

Applications must be reviewed in a timely manner. **An eligibility determination must be made, the family notified of its status, and the status implemented within 10 operating days of the receipt of the application.** Whenever possible, applications should be processed immediately, particularly for children who do not have approved applications on file from the previous year. \*Please also see “Flexibility in Determining the Effective Date for Children receiving free or reduced price benefits” on Page 16of this booklet.

**Income Applications:**

To establish that a household meets income eligibility requirements for benefits, reviewing officials must compare the household size and the total household income to the applicable Income Eligibility Guidelines (see page 31).

Only complete applications can be approved for meal benefits. Applications missing required information must be denied if the missing information cannot be obtained. To be considered complete, an application must include the required information. The SFA should make reasonable efforts to contact the household to obtain or clarify required information. All contact with families regarding eligibility can and should be documented on the application.

A complete **income application** must provide:

* Names of all household members;
* Amount, source, and frequency of current income for each household member;
* Signature of an adult household member; and
* Last four digits of the social security number of the household’s primary wage earner or another adult household member, or an indication that the household member does not have one

If an application lacks how frequently income is received (e.g., weekly, monthly, etc.), the reviewing official should make reasonable efforts to contact the household to clarify the frequency of income. If the SFA is unable to reach the family, the SFA will process the income as weekly.

\*Note: Applications cannot be approved for temporary free or temporary reduced price benefits. There is no temporary eligibility.

Indication of No Income:

Applications where the family has reported zero (0) income must be given free meal benefits from the point of approval, through the end of the school year. These families must also be provided free benefits for the first 30 operating days of the next school year (or until a new application is received for the next school year, whichever comes first).

**Any income field left blank is a positive indication of no income and certifies there is no income to report.**

Income Conversion for Multiple Frequencies of Income:

Many households have different sources of income at different frequencies, such as weekly or bi-weekly (every two weeks) wages and/or monthly social security benefits.

Use the following procedures:

* If a household has only one income source, or if all sources are the same frequency, do not use conversion factors. Compare the income or the sum of the incomes to the published Income Eligibility Guidelines for the appropriate frequency and household size to make the eligibility determination.
* If a household reports income sources at more than one frequency, the acceptable method is to convert all income to an annual amount by multiplying weekly income by 52, income received every two weeks by 26, income received twice per month by 24 and income received monthly by 12. Do not round the values resulting from each conversion. Add all the un-rounded converted values and compare the un-rounded total to the published Income Eligibility Guidelines for annual income for the appropriate household size.

\*Note: School districts must ensure that software they are using does not convert all income to monthly. Software should only convert to annual income when there are multiple income frequencies. The software should not round up each frequency calculation before totaling.

**Applications for residents of Residential Child Care Institutions (RCCIs):**

Each child residing in an RCCI is considered a household of one. An application is completed for each child unless the RCCI uses an eligibility documentation sheet for all children residing in the RCCI.

The RCCI eligibility documentation sheet must be signed by an appropriate official and include:

* Child’s name,
* Personal income received by the child,
* Child’s date of birth,
* Date of admission,
* Date of release,
* Official’s title, and
* Official’s contact information

Children attending but not residing in an RCCI are considered members of the household where they reside. Their eligibility is determined using a household application or through direct certification.

**Applications for Categorical Eligibility:**

A child who is a member of a household that receives benefits from the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance to Needy Families (TANF), or Food Distribution Program on Indian Reservations (FDPIR) Assistance Programs is categorically eligible for free meals or milk. Households receiving benefits under Assistance Programs and submitting a free and reduced price application must list a valid case number on the application.

School officials must familiarize themselves with valid SNAP/TANF case numbers before beginning the application approval process. When you conduct the required matching through the Direct Certification Matching Process (DCMP), you will become familiar with the SNAP numbers of your locale. It is imperative that SNAP or TANF applications are correctly approved with proper numbers to prevent potential fiscal sanctions being assessed against the SFA.

If families do not know their SNAP or TANF case numbers, you should first look in the SNAP DCMP electronic file (described on page 15). If you fail to locate the child, you should advise the family to: (1) contact their local Department of Social Services to obtain their case number, then complete sections 2 and 4 of the application; or (2) complete sections 3 and 4 of the application reporting family income.

Applications with invalid case numbers should not be approved. Families receiving SNAP or TANF no longer have a benefit issuance card that contains the information identifying that the family is currently eligible for benefits or their SNAP or TANF case number. Families must refer to the letter they receive from their local Department of Social Services to obtain their SNAP or TANF case numbers**.**

**It is important to note that even if you do not locate a student during the DCMP, if you receive an application with a SNAP or TANF case number, you must approve the application for free meals.**

For applications with a case number for an Assistance Program, a complete application must provide:

* Section 1: Names of the children for whom the application is made;
* Section 2: SNAP, TANF or FDPIR case number or identifier, for the children or any household member listed on the application;
* Section 4: Signature of the adult household member completing the application

**\*Note: Applications that list a valid SNAP, TANF or FDPIR case number do not have to include the last four digits of the adult household member’s social security number.**

**Extension of Eligibility for Free Meals:**

SFAs may extend free meal benefits to all children living in the same household as a child receiving SNAP, TANF or FDPIR benefits. Extension can also be provided to other household members of a student who was deemed Medicaid through the Direct Certification Matching Process (DCMP). School enrollment records of children living at the same address must be kept to document eligibility.

**\*Please see page 15 of this booklet for additional information regarding the DCMP.**

**Other Source Categorical Eligibility:**

**Other Source Categorically Eligible Programs include:**

* **Head Start**

All children enrolled in Head Start and participating in Child Nutrition Programs are automatically eligible for free meals without further application or eligibility determination if the following criteria are met:

* + The Head Start program must be located in and operated by the school/district
	+ The school/district must maintain administrative control over the program

 \*In the case where the Head Start program does not meet the above criteria, the school/district may vend meals to the Head Start program. The Head Start program may apply to receive reimbursement for those meals through the Child and Adult Care Food Program (CACFP) administered by the NYS Department of Health.

* **Migrant Education Program (MEP)**

A child is considered categorically eligible if the child is identified as meeting the definition of migrant in section 1309 of the Elementary and Secondary Education Act of 1965, 20 U.S.C. 6399, by the State, regional, or local MEP director, coordinator, or local educational liaison. See the “acceptable methods for identifying children who are Other Source Categorically Eligible” section below for ways in which you may provide free meal benefits to students identified as Migrant.

* **Runaway and Homeless Youth**

A child is considered homeless if the child is identified as lacking a fixed, regular, and adequate nighttime residence under the McKinney-Vento Homeless Assistance Act by the SFA liaison; or residing in a homeless shelter by an official of the shelter.

* All public school districts are required to appoint a homeless liaison. Children identified as homeless by the liaison are eligible for free meals. A list or e-mail from the Homeless Liaison that includes students’ names, effective date, and liaison signature must be retained on file to document eligibility for school year 2017-2018. The homeless family does not need to complete an application.
	+ Homeless families may reside with another household and still be considered homeless. The host family may include the homeless family as household members on their application, but must also include any income from the homeless family. The homeless child’s eligibility status cannot convey eligibility to the other children in either family. Eligibility of the host family must be determined by household size and income.
	+ Due to year-long eligibility, a change in household composition will not impact the eligibility determination for either the host family’s children or the homeless child. A child approved for free meal benefits and deemed homeless remains eligible for free meals for the entire school year.
	+ Visit [www.nysteachs.org](http://www.nysteachs.org) and click “Liaison List” on the toolbar to find the homeless liaison for your district.
* **Foster Children**

A foster child is a child whose care and placement is the responsibility of a State or local welfare agency or who is placed by a court with a caretaker household. This applies only to foster children who are formally placed by the State welfare agency or court. It does not apply to informal arrangements, such as caretaker arrangements or to permanent guardianship placements, which may exist outside of or as a result of State or court based systems. A child may still be considered a foster child if placed with relatives provided the placement is made by the State or local foster care system or courts. The State must retain legal custody of the child --whether placed by a welfare agency or a court -- in order for a child to be considered categorically eligible for free meals.

* A separate application is no longer needed for foster children. They are now categorically eligible for free meals based on documentation received from an appropriate State or local agency indicating their status as a foster child.
* The foster family may include the foster child as a household member. The foster child’s personal income must be included with the family income when processing the application. The foster child would be certified for free meals, and then the remainder of the household members would be certified for benefits based on household size (including the foster children) and income or other categorical eligibility information reported on the application.
* A foster child remains eligible for free meals for the entire school year, even if he or she returns home to their family.
* You can contact your county Office of Children and Family Services (OCFS) for a list of foster children in your district/school.

**Acceptable methods for identifying children who are Other Source Categorically Eligible include:**

* Submission of a household application that indicates “Other Source Categorical Eligibility” for one or more children;
* A form letter from the Other Source Categorically Eligible agency to the household, which in turn, the household provides to the school;
* Submission to the determining official of a list of Other Source Categorically Eligible children compiled by the SFA

**\*Note- Other Source Categorical Eligibility of a child does not convey eligibility to other children in the household.** If the household of an Other Source Categorically Eligible child submits an application, the applicable programs must be indicated. With the exception of a foster child, the SFA official must contact the Other Source Categorically Eligible agency liaison to confirm that the children are eligible under one of these programs before free benefits are provided.

**Direct Certification:**

Direct Certification is the process that enables children from families receiving SNAP to receive free meals or free milk at school without having to complete an application. Direct Certification results in more students gaining access to the school nutrition programs, because some parents do not complete application forms correctly or do not submit applications. Students found in the Direct Certification Matching Process (DCMP) that are noted as Medicaid are also to be provided free eligibility. SFAs may extend free meal benefits to all children living in the same household as a child receiving SNAP benefits. Extension can also be provided to other household members of a student who was deemed Medicaid through the DCMP. **School enrollment records of children living at the same address must be kept to document extension of eligibility.**

**Direct Certification Matching Process (DCMP): New Process Beginning July 2017**

To provide increased access to free meals to children entitled to free meal benefits and allow for more accurate reporting, better policy and decision making at the local, State and federal levels, the Child Nutrition Program Administration (CNPA) has developed a new Direct Certification Matching Process (DCMP).  **The DCMP process through the Child Nutrition Management System (CNMS) will be phased out over the 2017-18 school year with enhanced capabilities made available through the new State Match System and related business applications.**

The new State Match feature provides users with access to direct certification (DC) data (e.g., SNAP and Medicaid lists) and to DC data that has been matched to New York State student records through the New York State Student Identification System (NYSSIS).

The NYSSIS system is already in-use by school personnel responsible for assigning unique IDs to students. NYSSIS uses a sophisticated matching engine to identify duplicate student records and discourage the creation of multiple student IDs for the same child. The engine is also being used behind the scenes by the State Match system to match DC records to student records maintained in the NYSSIS system. State Matching is a USDA best practice as it relieves School Food Authorities (SFAs) from having to match at the local level. Rather than DC data alone, the State Match system will deliver to SFAs student identifiers (e.g., a local ID and a NYSSIS ID) appended to DC data for easy import into food service management or other local student information systems.

\* The NYSSIS system and State Match capabilities are available on the NYSED Web site, at the NYSED Application Business Portal (<https://portal.nysed.gov/abp>). Instruction for conducting this process is provided in a separate memo on the CNKC website.

All SFAs are required to complete the online DCMP process a **minimum of three times a year**. The new system will process DC data monthly; therefore, SFA’s are encouraged to access the data more frequently to ensure that children entitled to free meal benefits receive them. DCMP users will be required to certify that this information will remain confidential in compliance with the disclosure statement provided. The online DCMP will help reduce the waste from paper applications and the burden on low income households to return applications. The DCMP is intended to certify all eligible students receiving SNAP and Medicaid (determined by the Medicaid Administering Agency at or below 133 percent of the Federal poverty guidelines before the application of blocks, exceptions or disregards).

SFAs must inform directly certified families that they have been approved for meal benefits through the DCMP. The family must be provided the opportunity to decline the program benefits. SFAs should use the prototype notification letter for directly certified students on page 50 (English) and page 51 (Spanish).

**Direct Certification Record Keeping:**

Record keeping and reporting requirements for children whose eligibility is obtained from these direct certification methods are the same as for free and reduced price application forms. Records must be maintained at the SFA level; retrievable by building; and, maintained for three years plus the current year, regardless of the child's actual attendance during this period. The number of children eligible for program benefits as a result of direct certification must be included with the count of free eligibles on reimbursement claim forms when reporting numbers of approved applicants. Schools can use students’ previous year designations for the first 30 operating days of the new school year only.

**Eligibility Letters:**

The Eligibility Letters for School Meals/Milk have been discontinued with the start of the new Direct Certification Statewide Match System.

**Application Processing:**

Applications must be reviewed in a timely manner. An eligibility determination must be made, the family notified of its status, and the status implemented within 10 operating days of the receipt of the application. Whenever possible, applications should be processed immediately, particularly for children who do not have approved applications on file from the previous year. Once an eligibility determination is made, households should be notified immediately.

A new eligibility determination that reduces benefits (e.g. free to reduced price) should be implemented only after the household has been notified.

Determining officials must record the eligibility determination as follows:

* + - Indicate approval date;
		- Indicate the level of benefit for which each child is approved (if levels are different); and

• Sign or initial and date the application.

The determining official must sign/initial and date each application, or sign/initial and date a cover sheet attached to a group of applications. A computer system can be used to capture the original date of approval, the basis for the determination (the household size and income used), and update the status of applications to account for transfers, withdrawals, terminations, and other changes. A notation should be made to an electronic file.

**Duration of Eligibility:**

Once an eligibility determination is made, a child’s eligibility status remains in effect for one year. At the start of the subsequent school year, children retain their previous year’s eligibility status for 30 operating days or until a new determination is made, whichever comes first. Also see Carryover of Previous Year’s Eligibility section.

If no new application is submitted and eligibility is not established through direct certification by the end of the 30-day carryover period, eligibility for free or reduced price meals expires and the SFA must discontinue benefits for these children. The school or SFA is encouraged to provide households with a reminder notice that their free or reduced price meal benefits will end on a specified date if the household does not submit a new application or the school has not received notice that the child is eligible through Assistance Programs or is Other Source Categorically Eligible. The reminder notice also could include the cost of paid meals.

**Flexibility in Determining the Effective Date for Children receiving free or reduced price benefits:**

**Applications**

Children have generally been certified eligible for free or reduced price meal benefits on the date the household application is approved. However, SFAs have flexibility concerning the effective date of certification for Program benefits. **If the SFA chooses, it could establish the date of submission of an application as the effective date of eligibility, rather than the date the official approves it.** SFAs can use this flexibility when processing household income applications, as well as when waiting for documentation of other source categorical eligibility (e.g., for homeless or migrant children) indicated on a household application.

**To use this flexibility when approving applications, SFAs must:**

* Notify their Child Nutrition Program Representative in writing
* Exercise the flexibility for all students in all participating schools and Programs
* Have a method to document the date the application was submitted, such as a date stamp
* Refund any money paid by or on behalf of the child for a reimbursable meal or milk prior to the eligibility determination, including forgiving accrued debt.

**Automated Data Matching Method**

SFAs may consider the effective date of eligibility for free school meal or milk benefits to be the date the automated data matching file (or benefit recipient file from another agency) is made available to the SFA which first identifies the student as eligible for direct certification, rather than the date the SFA accesses and processes the automated data matching file into their local point of service (POS) system. To be used for this purpose, the data file must have been generated and received by the SFA in the current school year.

**Letter Method and Lists or Other Forms of Documentation**

SFAs may consider the effective date of eligibility for free school meal or milk benefits to be the date the household or appropriate State or local agency submitted the letter, list or other form of documentation to the SFA, rather than the date the school official approves the documentation.

**To use this flexibility, SFAs must:**

* Notify their Child Nutrition Program Representative in writing
* Do so consistently for all the direct certification methods (i.e., automated data matching, and lists or other forms of documentation)
* Apply the direct certification eligibility effective date flexibility consistently to all students directly certified across all participating schools and school meal programs within the SFA
* Document the effective date used, such as a date stamp, to document the date lists or letters from other agencies were received, or the documented and traceable run date of automated match files or recipient benefit files from another appropriate agency
* If categorical eligibility is based on SNAP, TANF or FDPIR, the extended eligibility provision in 7 CFR 245.6(b)(7) also applies

**Please see the USDA Eligibility Manual for School Meals for more information.**

**Change in Household Circumstance:**

Once an eligibility determination is made, a child’s eligibility status remains in effect for one year. At the start of the subsequent school year, children retain their previous year’s eligibility status for 30 operating days or until a new determination is made, whichever comes first. A new eligibility determination can be made through the approval or denial of a new application or through direct certification. Temporary approval of eligibility is not permitted because of the year-long duration of eligibility.

**Households are NOT required to report changes in income, household size, or changes with regard to participation in a program that makes the children categorically eligible. Eligibility, once established, remains in effect for the entire school year.**

However, households may voluntarily report a change. If a change is reported that will increase benefits, the SFA must put that change into effect.

Please see the USDA Eligibility Manual for School Meals for additional information.

**Notification of Eligibility:**

Households must be notified, either in writing or verbally, of their child’s approved free or reduced eligibility status within 10 operating days of receipt of the application. The SFA may e-mail the notification of the household’s approval for meal benefits to the adult household member who signed the application.

**Notification to Households Denied Benefits**

Households with children who are denied benefits must be provided with prompt written notification of the denial.

The denial notification must advise the household of:

* Reason for denial of benefits;
* Right to appeal;
* Instructions on how to appeal; and
* Ability to re-apply for free and reduced price benefits at any time during the school year

**Notification of Eligibility Established through Direct Certification**

The SFA must notify the household about eligibility established through direct certification.

The notification must include the following information:

* The child is eligible for free benefits;
* No further application is necessary;
* An explanation of extended eligibility and how to notify the SFA of any additional children in the household not listed on the notification; and
* How to notify the SFA if free benefits for directly certified children are not wanted

This notification must also be provided to households with children directly certified through the letter method or through contacts with officials, such as the SFA’s homeless liaison or a foster care agency.

\*Note- Prototype notification letters that include all required information and should be use are included in this booklet.

**Special Situations:**

**Military Families and Eligibility in the Child Nutrition Programs**

For households affected by deployments in support of possible future military contingencies, USDA has addressed the deployment of family members for military service to accommodate free and reduced price meal eligibility determinations, tier 1 day care home determinations and meal benefits for children temporarily residing with their providers.

For the purpose of determining household size, deployed service members should be considered as family members living apart on a temporary basis. Instruct families to include the names and income of deployed service members on their application forms. The reviewing official should count the service member as part of the household in establishing a child’s eligibility for free and reduced price meals, or a day care home provider’s eligibility for tier 1 reimbursement rates.

Deployment of a parent or guardian may also affect the eligibility of a child, who temporarily resides with a day care home provider, to receive meals in the Child and Adult Care Food Program. Although the child may live with the provider while the service member is deployed, the child would not be considered a “provider’s own” child. In this special situation, the child would continue to participate in the meal service as a nonresidential participant. To claim reimbursement for program meals, the day care home provider must have power of attorney, custody, or an agreement established by the military to provide residential care to the child.

**Treatment of Military Housing Allowance for Families in “Privatized Housing”** **For Purposes of Determining Eligibility in the Child Nutrition Programs**

Effective May 13, 2002, certain housing allowances are excluded from consideration in total income in the school nutrition programs, the National School Lunch Program, School Breakfast Program, the Special Milk Program and the Summer Food Service Program. In some instances, military personnel living in privatized housing receiving a housing allowance will not include this allowance in their total income when evaluating household eligibility for free or reduced price meals or free milk. The Military Housing Privatization Initiative refers to the operation of military housing under private contractors at military installations at a number of military bases. A housing allowance is given under this privatization initiative, which is shown on the leave and earnings statement of military personnel living in the housing provided. This income exclusion is only for those military personnel living in the housing provided by the Military Housing Privatization Initiative. It does not apply to those military personnel living off base in the community neighborhood in the general commercial/private real estate market.

**Treatment of U.S. Armed Forces Family Subsistence Supplemental Allowances (FSSA)**

The Floyd D. Spence National Defense Authorization Act of Fiscal Year 2001 (Public Law 106-398) requires the Armed Forces to pay certain low-income service members and their families a family subsistence allowance not to exceed $500 per month to reduce the number of service members and their families who rely on SNAP. The Armed Forces will pay the FSSA payment to eligible service members beginning June 1, 2001. For Child Nutrition Program (CNP) eligibility determination purposes, the FSSA payments must be counted as earned income to the household. There is no legislative authority that would permit the exclusion of FSSA payments from consideration as income in the CNP. We have been advised that the Leave and Earnings Statement for the Marines will identify the payment as “FSSA”. The Leave and Earnings Statement for the Army, Navy and Air Force will temporarily identify the payment as “Saved Pay” and subsequently be changed to identify the payment as “FSSA”. Please note that some military families receiving FSSA payments may still be income eligible for free or reduced price meal benefits. Other military families receiving FSSA payments also may be certified to receive SNAP benefits (despite the FSSA payment); these families would be categorically eligible for free meals in the CNP.

**Medicaid or Medicare**

Medicaid or Medicare information on an application for meal benefits does not qualify students for free or reduced price meals. Only students and extension to other household members may be provided free meal benefits based on Medicaid if found during the DCMP. **The only eligible Medicaid students reside in the DCMP data**. If you find two records for a child in the DCMP data- one for SNAP and one for Medicaid, you should certify the student free eligible based on SNAP, as DCMP SNAP is the highest level of free eligibility in Child Nutrition Programs.

**Special Education/Foreign Exchange/Immigrant/Refugee Students**

Special education, foreign exchange, immigrant and refugee students are not automatically eligible for free meals. These students qualify for free, reduced price and paid meals by using the same income guidelines or categorical criteria used for all students. The SFA may claim these students for free or reduced price reimbursement only if a correctly approved application or other certification documentation is on file.

**Universal Pre-K (UPK)**

Students enrolled in Universal Pre-K programs are not automatically eligible for free meal benefits. These students are not necessarily from economically disadvantaged backgrounds. Only UPK students with direct certification eligibility or approved income applications on file would be eligible for free or reduced price benefits.

**Administrative Prerogative**

In certain circumstances when households fail to apply for free or reduced price meals, the nutritional needs of students who are obviously at an economic disadvantage may be addressed by local officials.

Using administrative prerogative, local officials may complete an application for a student known to be eligible if the household had applied. This limited use option acknowledges the various reasons that a family may fail to apply for free or reduced price meals, such as lack of understanding, fear of authority, alien status, substance abuse, etc.

To exercise this option properly, an application must be completed on behalf of the student, based on the best family size and income information available. The source of this information must be noted on the application. Documented prior efforts must be made by the SFA to obtain a completed application from the parent or guardian. The household must be notified that the child has been certified to receive free or reduced price benefits.

The names of all household members, a social security number, or an adult signature need not be secured. Instead, the name of the student, household size, estimated family income including source, and the administrator's signature must be provided. The household must be notified of the student's approval status for free or reduced price meals. These applications should be excluded from the verification process.

This option must be used judiciously and only after repeated efforts to obtain applications from families have been unsuccessful. It is to be used on an individual basis and must not be used to provide eligibility determinations for large numbers of students. It also may not be used when family income is above the eligibility guidelines, even though the children are coming to school without a meal or money. Family economic status must remain the criterion for administratively making the decision to provide the student access to free or reduced price meals.

Reimbursement funds will be reclaimed for improper use of administrative prerogative.

**Administrative Prerogative- Questions and Answers:**

1. **Can a student be approved for free or reduced price meals without an application from the parent or guardian?**

 Yes. Under special circumstances, a school official may use administrative prerogative and fill out an application for a student whom they have reason to believe would be eligible if the household were to apply. However, the school must first attempt to obtain an application from the household. This prerogative should not be indiscriminately used to claim ineligible students for free meals or to generate aid for other federal programs.

**2. How can a school show that attempts have been made to obtain the application from the household?**

 Copies of mailings to the household and documentation of conversations with the parent/guardian or a responsible adult in the household must be kept on file. An administrator cannot arbitrarily qualify students from families who did not reapply from the prior year.

**3. If the parent/guardian of the student cannot be reached or communicated with due to language barriers, etc., who may be contacted for household information?**

An employer, a Social Service official, immigration official, or a relative suggested by either the student or the student's teacher may be contacted to urge the household to apply.

**4. Is there a specific time-period that the school must allow to pass before attempts to obtain an application are deemed unsuccessful?**

 No specific time-period is required. The process should be facilitated as quickly as possible so that the student is not going without meals in school.

**5. Can an administrative prerogative be implemented during the period of time in which the school is attempting to obtain an application from the household?**

 If the school has reason to believe that the student is going without meals in school on a regular basis due to financial need, the school may implement an administrative prerogative immediately.

**6. What should the school official be looking for as evidence that the student is not getting proper nourishment?**

 The student's teacher, the school nurse, or other school personnel in direct contact with the student may notice behavior indicating under nourishment, such as irritability, listlessness, complaints of headache or stomach ache, and absenteeism. School cafeteria personnel may notice that a student has no food during the lunch period or is constantly requesting to charge lunch.

**7. Can a school official simply write a note to the food service manager to add a student's name to the list of eligible students?**

No. The school official must complete an application that contains the name of the student, the household size, an estimated family income, and a signature of the school official. The source of information must be noted on the application.

**8. How should the school tell the student and the household that the student would have access to free meals in the school cafeteria?**

The household must be informed of the decision via phone, correspondence, or in person. The student may be told by the teacher, school nurse, or other school official.

**9. Is an application completed by a school official handled in the same way as those submitted by**

 **households?**

Yes. Like other applications, it must be counted for purposes of the claim for reimbursement and retrievable by building during a review. However, the application should not be included in the verification process.

**10. Can the administrative prerogative be implemented for families or groups of students who appear to be lacking proper nutrition?**

 No. Applications must be completed on an individual basis.

**11. Can an application be completed for a student who appears to be lacking proper nourishment, if the household has indicated that it is not eligible for benefits?**

No. An application can only be completed for students who appear to be missing meals for reasons of financial need. Other problems occurring in a household that may result in poor eating habits, but are not a reflection of family economic status, should not be resolved by this measure.

**POLICY STATEMENT FOR FREE AND**

**REDUCED PRICE MEALS OR FREE MILK**

 , (Local Education Agency or governing body) responsible for administration of one or more schools referred to as the school food authority (SFA), has entered into agreement to participate in the National School Lunch Program, School Breakfast Program, and/or Special Milk Program and accepts responsibility for providing free and reduced price meals and/or free milk to eligible children in the schools under its jurisdiction.

The SFA assures the State Education Department that it will uniformly implement the following policy with respect to determining the eligibility of children for free and reduced price meals in each school building under its jurisdiction that participates in the programs mentioned above.

In fulfilling its responsibilities, the SFA agrees to the following:

1. **Free Meals and (For Milk Only Schools) Free Milk**

To serve meals or milk at no charge to children from families whose income is at or below the income levels for free meals and milk listed on the annual income eligibility guidelines, or to children from Supplemental Nutrition Assistance Program (SNAP) households, Temporary Assistance to Needy Families (TANF) households, households participating in the Food Distribution Program on Indian Reservations (FDPIR) that provide a case number, or households that are identified through the SNAP/MEDICAID Direct Certification Matching Process.

1. **Reduced Price Meals**

To serve breakfast and/or lunch at a reduced price of $.25 or less, to children from families whose income is within the range of the annual income eligibility guidelines for reduced price meals.

1. **Special Conditions**

To serve free meals/milk to foster children in cases where the court or welfare agency is legally responsible for the child. Documentation from an appropriate State or local agency supports the foster child’s status. Foster children are categorically eligible for free meals and may be included as a member of the foster family if the foster family chooses to also apply for benefits for other children. Including children in foster care as household members can help other children in the household qualify for free or reduced price meals. If the foster family is not eligible for free or reduced price meal benefits, the foster child will still be provided free meal benefits.

To provide free or reduced price meals or free milk to children whose parents or guardians have become unemployed, provided the loss of income causes the family income during the period of unemployment to be within the eligibility criteria. These students must be approved using one of the methods noted in this eligibility guidance booklet.

1. **Non-Discrimination**

1. That there will be no physical segregation of, or any other discrimination against, any child because of his/her inability to pay the full price of the meal or milk. LEAs selling competitive foods during a meal service are encouraged to include in the description of how the cafeteria and meal service prevents overt identification of the children receiving free and reduced price meals or free milk. The names of children eligible to receive free or reduced price meals or free milk shall not be published, posted, or announced in any manner, and there shall be no overt identification of any such children by use of special tokens or tickets, or by any other means. Further assurance is given that children eligible for free or reduced price meals or free milk shall not be required to:

* Work for their meals or milk.
* Use a separate lunchroom.
* Go through a separate serving line.
* Enter the lunchroom through a separate entrance.
* Eat meals or drink milk at a different time.
* Eat a meal different from the meal sold to children paying the full price for the same meal or drink milk different from that sold to children paying the full price.

2. That in the operation of Child Nutrition Programs, no child shall be discriminated against because of his or her race, sex, age, color, disability, national origin, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

1. **Hearing Procedures**

To establish and use a fair hearing procedure in cases of appeal by parents of the school's decision on applications and in cases where the school official challenges the accuracy of information contained in an application or of the continued eligibility of any child for a free or reduced price meal or free milk. During appeal, hearing, and disposition of the case, the child will receive free or reduced price meals or free milk.

To maintain, for a period of three years plus the current year, records of all such appeals, challenges, and dispositions.

That in initiating the hearing procedure, the parent or local school official may request a conference to provide an opportunity for the parent and school official to discuss the situation, present information, and obtain an explanation of data submitted on the application and decisions rendered. Such a conference shall not in any way prejudice or diminish the right to a fair hearing.

That the hearing procedure shall provide:

1. A simple, publicly announced method for making an oral or written request for a hearing;
2. An opportunity to be assisted or represented by an attorney or other person in presenting an appeal;

3. An opportunity to examine, prior to and during the hearing, the documents and records presented to support the decision under appeal;

4. That the hearing shall be held with reasonable promptness and convenience and that adequate notice shall be given as to the time and place of the hearing:

5. An opportunity to present oral or documentary evidence and arguments supporting the position;

6. An opportunity to question or refute any testimony or other evidence and to confront and cross-examine any adverse witnesses;

7. That the hearing shall be conducted and the decision made by a hearing official who did not participate in making the decision under appeal or in any previous conference;

8. That the decision of the hearing official, who may not be the same person as the reviewing and/or the verification official, shall be based on the oral and documentary evidence presented at the hearing and made a part of the hearing record;

9. That the parties concerned and their designated representative shall be notified in writing of the decision of the hearing official;

10. That a written record shall be prepared with respect to each hearing which shall include: the decision under appeal; any documentary evidence and a summary of any oral testimony presented at the hearing; the decision of the hearing official, including the reasons therefore and a copy of the notification to the parties concerned of the decision of the hearing official; and

11. That such written record of each hearing shall be preserved for a period of three years plus the current year and shall be available for examination by the parties concerned or their representative at any reasonable time and place during such period.

1. **Reviewing Official**

A reviewing official shall review and make determinations of eligibility using the criteria outlined in this policy to determine which individual children are eligible for free or reduced price meals or free milk. The official should sign, date, and indicate the eligibility determination on each application.

1. **Notice to Parents**

To send at the beginning of each school year, and whenever there is an increase in eligibility, to the parent or guardian of each child, a letter such as the prototypes in Attachment VII, VIII, or IX including a form on which to make application for free or reduced price meals or free milk, and a parent disclosure letter and consent statement.

1. **Applications**

To advise parents to complete the application and return it to the reviewing official for eligibility determination.

To maintain applications and documentation of action taken, for three years after the end of the school year to which they pertain.

To accept applications at any time during the year and to supply applications to any parent enrolling a child in a school for the first time.

To accept the application of a child who transfers from one school to another under the jurisdiction of the SFA. Copies of the application and eligibility dates should be retained with the records of both schools. The application from the transfer student from another SFA should be reviewed to ensure that it is correctly approved.

To inform parents of eligibility determinations. Parents must be notified in writing of the reason(s) for denial of their application, notification of the right to appeal, instructions on how to appeal, and a reminder to parents that they may reapply for free and reduced price benefits at any time during the school year. Copies of denial letters to parents must be maintained for three years plus the current year.

1. **Verification of Applications**

Verify the eligibility of applicant households **by November 15** in accordance with program regulations and annually maintain records.

1. **Anonymity and Accountability**

To establish a procedure to collect money from children who pay for their meals or milk which prevents overt identification, and accounts, at the point of service, for the number of free, reduced and full price meals served or the number of half-pints of free and full price milk served. The procedure(s) adopted will be used in order that no other child in the school will consciously be made aware, by such procedure, of the identity of the children receiving reduced price meals, free meals, or free milk. The LEA will develop measures to prevent disclosure of confidential free and reduced price eligibility information as required and include the steps with this policy statement.

1. **Amendments to Policies**

To submit to the State Education Department any alterations or amendments to the policy including eligibility criteria, applications, public announcements, etc., for approval prior to implementation. Such changes will be effective following approval by the NYSED Child Nutrition Program Administration office. Any and all changes

in eligibility criteria shall be publicly announced in the same manner used at the beginning of the school year. Changes in content to any prototype documents from this guidance booklet require prior State Agency approval.

1. **Records**

To maintain a file of the following records for three years plus the current year after the end of the fiscal year to which they pertain:

1. All eligibility determinations obtained through the Direct Certification Matching Process (DCMP) (SNAP, Medicaid, Foster)

2. All applications and documents to support homeless, migrant, head start, etc.

3. Records of all appeals and challenges and their disposition.

4. All notifications of eligibility determinations, including denial letters.

5. Records of all verification efforts and resulting eligibility changes.

1. **Public Release**

At the beginning of the school year, a public release containing the same information supplied to parents and including both free and reduced price eligibility criteria should be provided to the media (local newspaper), the local unemployment office, and any major employers contemplating large layoffs in the areas from which the school draws its attendance. Documentation must be kept on file for three years plus the current year identifying where the public release was sent.

1. **Special Assistance - Provision 2 and Community Eligibility Provision**

Provision 2: In schools where all enrolled children, regardless of their category of eligibility, are served meals at no charge; notify parents, distribute, and certify applications for free and reduced price students once every four consecutive school years. For three years after the base year, the school is not required to count meals served by category for claiming purposes. After the base year, the building's monthly reimbursement is based on total meal counts and monthly claim statistics from the base year. Maintain accountability and record keeping requirements as mandated by program regulations for this alternate reimbursement system.

**\* If your school year begins in September, you must notify your Child Nutrition representative by September 1, 2017 if you intend to participate in Provision 2 for the 2017-2018 school year. If your school year begins in July, you must notify us by July 1, 2017.**

Community Eligibility Provision: Schools where at least 40 percent of enrolled students have been deemed free eligible through a means other than an income application (i.e., directly certified using electronic SNAP/Medicaid, homeless, migrant, runaway, foster, and head start) as of April 1, 2017, may participate in the Community Eligibility Provision for the 2017-2018 school year. The schools will receive reimbursement in the free and paid category based on the percentage of directly certified students as noted above times a multiplier (as written in federal regulation). For more details about participation and how to apply, please see the CEP Memo on the Child Nutrition Knowledge Center website.

1. **Administrative Prerogative**

In certain circumstances when households fail to apply for free or reduced price meals, the nutritional needs of students who are obviously at an economic disadvantage may be addressed by local officials.

Using administrative prerogative, local officials may complete an application for a student known to be eligible if the household had applied. This limited use option acknowledges the various reasons that a family may fail to apply for free or reduced price meals, such as lack of understanding, fear of authority, alien status, substance abuse, etc.

To exercise this option properly, an application must be completed on behalf of the student, based on the best family size and income information available. The source of this information must be noted on the application. Documented prior efforts must be made by the SFA to obtain a completed application from the parent or guardian.

The names of all household members, a social security number, or an adult signature need not be secured. Instead, the name of the student, household size, estimated family income including source, and the administrator's signature must be provided. The household must be notified of the student's approval status for free or reduced price meals. These applications should be excluded from the verification process.

This option must be used **judiciously and only after repeated efforts to obtain applications from families have been unsuccessful.** It is to be used on an individual basis and must not be used to provide eligibility determinations for large numbers of students. It also may not be used when family income is above the eligibility guidelines, even though the children are coming to school without a meal or money. Family economic status must remain the criterion for administratively making the decision to provide the student access to free or reduced price meals.

1. **Meal Eligibility for Homeless/Migrant/Runaway Children**

Children who are categorically eligible under Other Source Categorically Eligible Programs should contact the school for assistance in receiving benefits and indicate the source of their status on the application.

The United States Department of Agriculture (USDA) has acknowledged that the number of homeless, migrant and runaway children has risen considerably in the last few years, that parents/guardians who are homeless or migrant often fail to return a free meal application, and these children are often not included in the direct certification process. While administrators can exercise the administrative prerogative option for determining program eligibility, this process is only intended to be exercised on a case-by-case basis and becomes burdensome in areas where there are many homeless/runaway children residing in shelters or migrant status children. USDA has therefore established the following procedures for all Child Nutrition Programs when an application is not submitted by the household or it is not anticipated that an application will be submitted:

* The migrant coordinator, homeless liaison or runaway provider may provide you with a list of eligible children based on established criteria. The list must be dated and signed by the coordinator, liaison or provider. These children are then directly certified for free meals for the school year. No other documentation is needed. This is the preferred option.

Other options:

* The director of the homeless shelter at which the child resides can complete and submit an application for the child, or send a list of all children residing in the shelter to the school;
* Local level officials may complete an application for a child and approve the child for free meals based solely on their knowledge that the child's address is a homeless shelter or that the child has no known address and is indeed homeless;
* If large numbers of homeless children make it impractical for a homeless shelter or school officials to complete individual applications, the school administrator may establish a list of eligible students based on his/her knowledge of the family’s residence (shelter, address, car, etc.). The documentation necessary to substantiate free meal eligibility for a list of children must contain at a minimum the following information:
* The child's name
* The effective date of eligibility determination
* The name of the shelter, etc., where the child resides
* The signature of the determining official
* Documentation of migrant status children should be maintained by the school migrant coordinator as documentation to substantiate free meal eligibility. This should include the date, the child’s name, and signature of the migrant coordinator. For a list of contacts in your school, go to [www.nysteaches.org](http://www.nysteaches.org).
1. **Food Distribution Program on Indian Reservation (FDPIR)**

Public and nonpublic schools participating in the School Lunch, Breakfast, or Special Milk Programs may accept a Food Distribution Program on Indian Reservation (FDPIR) case number in lieu of household income, SNAP or TANF number.

1. **Food Substitutions for Children With Disabilities**

Federal regulations governing the operation of Child Nutrition Programs and Section 504 of the Rehabilitation Act of 1973 require that children with disabilities be offered the opportunity to participate in all academic and nonacademic activities including the school nutrition programs. To ensure that these children are not denied reasonable access to the programs, the Department of Agriculture's regulations require schools and institutions to make reasonable accommodations, such as providing substitutions in the regular meal patterns, for children who have a disability and whose disability restricts their diet. A student with a disability is defined in 7 CFR part 15b.3 as one who has "... a physical or mental impairment which substantially limits one or more major life activities..." Major life activities are defined to include functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

Accordingly, meal substitutions must be made for children with disabilities and must be supported by a statement signed by the physician attesting to the need for the substitutions and recommending alternate foods. These meals must be offered at no extra charge. Substitutions may also be made for non-disabled children who are unable to consume the regular meal because of medical or other special dietary needs, though schools are not required to do so in these instances. Substitutions for non-disabled children must be supported by a statement signed by a recognized medical authority. **Children with disabilities are not automatically eligible for free meal benefits.** Parents must adhere to the same income eligibility criteria and procedures used for all children.

1. **Limited English Proficient (LEP) Households**

LEAs will ensure there are no barriers for participation in Child Nutrition Programs for Limited English Proficient (LEP) families and must communicate with parents and guardians in a language they can understand throughout the certification and verification processes.

1. **Meal Charge Policy**

LEAs will establish a written and clearly communicated policy to address student meal charges when payment cannot be collected at the point of service. Charge policies will be reasonable, well-defined and maintain the integrity and dignity of students and households to minimize harm to the student.

1. **Program Terminations:** To provide 60 days advance written notice to parents and to immediately inform the NYSED Child Nutrition Program Administration of intent to discontinue participation in NSLP/SBP.

**Disclosure Chart**

The NSLA specifies that persons directly connected with the administration or enforcement of certain programs or activities are permitted to have access to children's eligibility information. The following chart shows the circumstances for disclosing eligibility information. If you have concerns or questions about disclosing children's eligibility information, refer to the USDA Eligibility Manual for School Meals or contact your Child Nutrition Program representative for further guidance. Prototype parent consent forms are included in this booklet.

|  |  |  |
| --- | --- | --- |
| **Recipient of Information** | **What May be Disclosed** | **Requirements** |
| Programs under the National School Lunch Act or Child Nutrition Act | All Eligibility information | Prior notice and consent not required |
| Federal/State or local means tested nutrition programs with eligibility standards comparable to the NSLP | Eligibility status only | Prior notice and consent not required |
| Federal education programs | Eligibility status only | Prior notice and consent not required |
| State education programs administered by a State agency or local education agency | Eligibility status only | Prior notice and consent not required |
| Local education programs | **NO** eligibility information, unless parental consent is obtained | Parental consent |
| Medicaid or the State Children's Health Insurance Programs (SCHIP), administered by a State or local agency authorized under titles XIX or XXI of the Social Security Act to identify and enroll eligible children | All Eligibility information unless parents elect not to have information disclosed | Must give prior notice to parents and opportunity for parents to decline to have their information Disclosed |
| State health programs other than Medicaid/SCHIP, administered by a State agency or local education agency | Eligibility status only | Prior consent not required |
| Federal health programs other than Medicaid/SCHIP | **NO** eligibility information, unless parental consent is obtained | Parental Consent |
| Local health program | **NO** eligibility information, unless parental consent is obtained | Parental Consent |
| Comptroller General of the United States for purposes of audit and examination | All eligibility information | Prior notice and consent not required |
| Federal, State, or local law enforcement of officials investigating alleged violations of any of the programs under NSLA and CAN or investigating violations of any of the programs that are authorized to have access to names and eligibility status | All eligibility information | Prior notice and consent not required |

**Child Nutrition Eligibility Guide**

|  |  |
| --- | --- |
| **FREE ELIGIBILITY** | **REDUCED ELIGIBILITY** |
| **Direct Certification** | **Categorical Eligibility** | **Free Application** | **Reduced Application** |
| Supplemental Nutrition Assistance Program (SNAP)* *Automated Data Matching Method*
 | Temporary Assistance For Needy Families (TANF)* *Indicated Case Number on the Free and Reduced Price Meal Application*
 | Free and Reduced price meal applicant approved to receive free school meals/milk determined by the income indicated on the application was *at or below 130 percent of the Federal poverty guidelines.* | Free and Reduced price meal applicant approved to receive reduced price school meals determined by the income indicated on the application was *between 130 and at or below 185 percent of the Federal poverty guidelines.* |
| Temporary Assistance for Needy Families (TANF)- *Automated Data Matching Method* | Food Distribution Program On Indian Reservations (FDPIR)* *Indicated Case Number on the Free and Reduced Price Meal Application*
 |
| Medicaid recipients at or below 133 percent of the Federal poverty guidelines, determined by the Medicaid Program* *Automated Data Matching Method*
 | Supplemental Nutrition Assistance Program (SNAP)* *Re-certification Letter, or indicated Case Number on the Free and Reduced Price Meal Application*
 |
| \* Data Matching Systems indicate the corresponding Assistance Program | Homeless* *List obtained from the McKinney Vento liaison*

*(visit www.nysteachs.org for a list of homeless liaisons)* |
| EXTENSION OF CATEGORICAL ELIGIBILITY means that all children in a household with at least one child or household member who receives benefits from an Assistance Program are categorically eligible for free meals. Any one child’s or household member’s receipt of benefits from an Assistance Program extends free school meal eligibility to all children who are members of the household. | Runaway* *List obtained from the runaway provider*
 |
| Migrant* *List obtained from the migrant coordinator*
 |
| Foster* *List obtained from the Office of Children and Family Services (OCFS) or indicated on the Free and Reduced Price Meal Application*
 |
| Head Start and Even Start* *Enrollment records*
 |

**2017-2018 FREE AND REDUCED PRICE INCOME ELIGIBILITY ATTACHMENTS**

**I Income Eligibility Guidelines**

These scales are published each year by the federal government and must be used to determine eligibility for free and reduced price meals for the effective dates prescribed.

**II Annual News Release - Public Announcement**

Prior to the beginning of the school year this release, along with the income eligibility scales for both free and reduced price meals, must be provided to the local news media, the local unemployment office, and to any major employers contemplating large layoffs in the area.

**III Certification of Acceptance for Districts and Nonpublic Schools**

The Certification of Acceptance must be completed on the Child Nutrition Management System (CNMS) through the annual renewal process prior to the start of the school year.

**IV Certification of Acceptance for Residential Child Care Institutions (RCCIs)**

The Certification of Acceptance must be completed on the Child Nutrition Management System (CNMS) through the annual renewal process prior to the start of the school year.

**Va Free and Reduced Price Application Forms**

Along with the parent letter (Attachment VII), the family application (Attachment Va) must be distributed to all parents of children in attendance at school at the beginning of the school year and for new students when entering during the school year. Each family should complete only one application for their household. Spanish Family application (Attachment Vb) is also available.

**VI Free and Reduced Price Application Fact Sheet**

At the option of the SFA, this fact sheet may be sent home with the application or made available at the school.

**VII Parent Letter: School Meal Programs**

Prototype letter that must be sent to parents each year announcing the availability of the Child Nutrition Programs. **Only the Reduced Price eligibility scale from Attachment I is included in the breakfast/lunch parent letter.** The prototype parent letters included in this packet contain the appropriate scales for the 2017-2018 school year.

**VIII Parent Letter: School Meal Program (Spanish)**

**IX Parent Letters: Special Milk**

Those schools which sponsor the Special (Free) Milk program may adapt the Special Milk parent letter accordingly. Include only the free income eligibility scale from Attachment I when preparing the Special Milk parent letter.

**X Notification Letter**

All parents who submit applications must be informed of the approval or denial of such applications. Written notification must be provided to each family denied program benefits in order to provide the family with the hearing and appeals process and a copy of such written notification must be retained on file.

**XI Notification Letter to Parents from Direct Cert Matching Process**

Notification must be provided to households with children directly certified through the DCMP, letter method or through contacts with officials, such as the SFA’s homeless liaison or a foster care agency.

**XII Notification Letter to Parents from Direct Cert Matching Process (Spanish)**

**XIII Parent Letter - Children with Disabilities**

**XIV Parent/Guardian Consent Letter**

**XV Parent/Guardian Consent Statement (Single Program)**

**XVI Parent/Guardian Consent Statement (Multiple Programs)**

Attachment I

**2017-2018 INCOME ELIGIBILITY GUIDELINES**

**FOR FREE AND REDUCED PRICE MEALS OR FREE MILK**

|  |  |
| --- | --- |
| **Free Eligibility Scale** | **Reduced Price Eligibility Scale** |
| Free Lunch, Breakfast, Milk | Reduced Price Lunch, Breakfast |
| Household Size | Annual | Monthly | Twice per Month | Every Two Weeks | Weekly | Household Size | Annual | Monthly | Twice per Month | Every Two Weeks | Weekly |
| 1 |  $ 15,678  |  $ 1,307  |  $ 654 |  $ 603  |  $ 302  | 1 |  $ 22,311  |  $ 1,860  |  $ 930  |  $ 859 |  $ 430 |
| 2 |  $ 21,112  |  $ 1,760  |  $ 880  |  $ 812  |  $ 406  | 2 |  $ 30,044  |  $ 2,504  |  $ 1,252  |  $ 1,156  |  $ 578  |
| 3 |  $ 26,546  |  $ 2,213  |  $ 1,107  |  $ 1,021  |  $ 511 | 3 |  $ 37,777  |  $ 3,149  |  $ 1,575  |  $ 1,453  |  $ 727  |
| 4 |  $ 31,980  |  $ 2,665  |  $ 1,333  |  $ 1,230  |  $ 615 | 4 |  $ 45,510  |  $ 3,793  |  $ 1,897  |  $ 1,751  |  $ 876  |
| 5 |  $ 37,414  |  $ 3,118  |  $ 1,559  |  $ 1,439  |  $ 720  | 5 |  $ 53,243  |  $ 4,437  |  $ 2,219  |  $ 2,048  |  $ 1,024 |
| 6 |  $ 42,848  |  $ 3,571  |  $ 1,786  |  $ 1,648  |  $ 824  | 6 |  $ 60,976  |  $ 5,082  |  $ 2,541  |  $ 2,346  |  $ 1,173  |
| 7 |  $ 48,282  |  $ 4,024  |  $ 2,012  |  $ 1,857  |  $ 929  | 7 |  $ 68,709  |  $ 5,726  |  $ 2,863  |  $ 2,643  |  $ 1,322  |
| 8 |  $ 53,716  |  $ 4,477  |  $ 2,239 |  $ 2,066  |  $ 1,033  | 8 |  $ 76,442  |  $ 6,371  |  $ 3,186  |  $ 2,941  |  $ 1,471  |
| Each Add’l person add |  $ 5,434  |  $ 453  |  $ 227  |  $ 209  |  $ 105 | Each Add’l person add |  $ 7,733 |  $ 645  |  $ 323 |  $ 298  |  $ 149 |

BOTH of the above income eligibility scales should appear in the Public Announcement/release to the media (Attachment II)

ONLY the reduced price income eligibility scale can appear in the Letter to Parents (for those schools participating in the National School Lunch or Breakfast Program). (Attachment VII)

ONLY those schools that participate in the Special Milk Program and offer Free Milk can publish the Free Eligibility Scale in both the Public Announcement and the Letter to the Parent.

**Please note: *Incomes indicated on the free and reduced price eligibility scales are maximum amounts.***

 Attachment II

A**NNUAL NEWS RELEASE - PUBLIC ANNOUNCEMENT**

 \_\_\_\_\_\_\_\_\_\_\_\_ (Local School Food Authority) today announced a free and reduced price meal (Free Milk) policy for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ area school children.

Local school officials have adopted the following family eligibility criteria to assist them in determining eligibility:

**2017-2018 INCOME ELIGIBILITY GUIDELINES**

**FOR FREE AND REDUCED PRICE MEALS OR FREE MILK**

|  |  |
| --- | --- |
| **Free Eligibility Scale** | **Reduced Price Eligibility Scale** |
| Free Lunch, Breakfast, Milk | Reduced Price Lunch, Breakfast |
| Household Size | Annual | Monthly | Twice per Month | Every Two Weeks | Weekly | Household Size | Annual | Monthly | Twice per Month | Every Two Weeks | Weekly |
| 1 |  $ 15,678  |  $ 1,307  |  $ 654 |  $ 603  |  $ 302  | 1 |  $ 22,311  |  $ 1,860  |  $ 930  |  $ 859 |  $ 430 |
| 2 |  $ 21,112  |  $ 1,760  |  $ 880  |  $ 812  |  $ 406  | 2 |  $ 30,044  |  $ 2,504  |  $ 1,252  |  $ 1,156  |  $ 578  |
| 3 |  $ 26,546  |  $ 2,213  |  $ 1,107  |  $ 1,021  |  $ 511 | 3 |  $ 37,777  |  $ 3,149  |  $ 1,575  |  $ 1,453  |  $ 727  |
| 4 |  $ 31,980  |  $ 2,665  |  $ 1,333  |  $ 1,230  |  $ 615 | 4 |  $ 45,510  |  $ 3,793  |  $ 1,897  |  $ 1,751  |  $ 876  |
| 5 |  $ 37,414  |  $ 3,118  |  $ 1,559  |  $ 1,439  |  $ 720  | 5 |  $ 53,243  |  $ 4,437  |  $ 2,219  |  $ 2,048  |  $ 1,024 |
| 6 |  $ 42,848  |  $ 3,571  |  $ 1,786  |  $ 1,648  |  $ 824  | 6 |  $ 60,976  |  $ 5,082  |  $ 2,541  |  $ 2,346  |  $ 1,173  |
| 7 |  $ 48,282  |  $ 4,024  |  $ 2,012  |  $ 1,857  |  $ 929  | 7 |  $ 68,709  |  $ 5,726  |  $ 2,863  |  $ 2,643  |  $ 1,322  |
| 8 |  $ 53,716  |  $ 4,477  |  $ 2,239 |  $ 2,066  |  $ 1,033  | 8 |  $ 76,442  |  $ 6,371  |  $ 3,186  |  $ 2,941  |  $ 1,471  |
| Each Add’l person add |  $ 5,434  |  $ 453  |  $ 227  |  $ 209  |  $ 105 | Each Add’l person add |  $ 7,733 |  $ 645  |  $ 323 |  $ 298  |  $ 149 |

**SNAP/TANF/FDPIR Households:** Households that currently include children who receive the Supplemental Nutrition Assistance Program (SNAP) but who are not found during the Direct Certification Matching Process (DCMP), or households that currently receive Temporary Assistance to Needy Families (TANF), or the Food Distribution Program on Indian Reservations (FDPIR) must complete an application listing the child's name, a valid SNAP, TANF, or FDPIR case number and the signature of an adult household member. Eligibility for free meal benefits based on participation in SNAP, TANF or FDPIR is extended to all children in the household. When known to the School Food Authority, households will be notified of their children’s eligibility for free meals based on their participation in the SNAP, TANF or the FDPIR programs.

**Other Source Categorical Eligibility:** When known to the School Food Authority, households will be notified of any child’s eligibility for free meals based on the individual child’s designation as Other Source Categorically Eligible, as defined by law. Children are determined Other Source Categorically Eligible if they are Homeless, Migrant, Runaway, A foster child, or Enrolled in Head Start or an eligible pre-kindergarten program.

If children or households receive benefits under Assistance Programs or Other Source Categorically Eligible Programs and are not listed on the notice of eligibility and are not notified by the School Food Authority of their free meal benefits, the parent or guardian should contact the school or should submit an income application.

**Other Households:** Households with income the same or below the amounts listed above for family size may be eligible for and are urged to apply for free and/or reduced price meals (or free milk). They may do so by completing the application sent home with the letter to parents. One application for all children in the household should be submitted. Additional copies are available at the principal's office in each school. Applications may be submitted any time during the school year to (Title of Reviewing Official). Please contact \_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_ with any questions regarding the application process.

Households notified of their children’s eligibility must contact the School Food Authority if they choose to decline the free meal benefits. Households may apply for benefits at any time throughout the school year. Children of parents or guardians who become unemployed or experience a financial hardship mid-year may become eligible for free and reduced price meals or free milk at any point during the school year.

The information provided on the application will be confidential and will be used for determining eligibility. The names and eligibility status of participants may also be used for the allocation of funds to federal education programs such as Title I and National Assessment of Educational Progress (NAEP), State health or State education programs, provided the State agency or local education agency administers the programs, and for federal, State or local means-tested nutrition programs with eligibility standards comparable to the NSLP. Eligibility information may also be released to programs authorized under the National School Lunch Act (NSLA) or the Child Nutrition Act (CNA). The release of information to any program or entity not specifically authorized by the NSLA will require a written consent statement from the parent or guardian.

The School Food Authority does, however, have the right to verify at any time during the school year the information on the application. If a parent does not give the school this information, the child/children will no longer be able to receive free or reduced price meals (free milk).

Foster children are eligible for free meal benefits. A separate application for a foster child is no longer necessary. Foster children may be listed on the application as a member of the family where they reside. Applications must include the foster child's name and personal use income.

Under the provisions of the policy, the designated official will review applications and determine eligibility. If a parent is dissatisfied with the ruling of the designated official, he/she may make a request either orally or in writing for a hearing to appeal the decision. (Title), whose address is has been designated as the Hearing Official. Hearing procedures are outlined in the policy. However, prior to initiating the hearing procedure, the parent or School Food Authority may request a conference to provide an opportunity for the parent and official to discuss the situation, present information, and obtain an explanation of the data submitted in the application or the decisions rendered. The request for a conference shall not in any way prejudice or diminish the right to a fair hearing.

Only complete applications can be approved. This includes complete and accurate information regarding: the SNAP, TANF, or FDPIR case number; the names of all household members; on an income application, the last four digits of the social security number of the person who signs the form or an indication that the adult does not have one, and the amount and source of income received by each household member. In addition, the parent or guardian must sign the application form, certifying the information is true and correct.

**Nondiscrimination Statement:** This explains what to do if you believe you have been treated unfairly.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) found online at: <http://www.ascr.usda.gov/complaint_filing_cust.html>, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter 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;

(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

 Attachment III

|  |
| --- |
| **KEEP THIS FORM ON FILE. DO NOT RETURN TO SED** |

**CERTIFICATION OF ACCEPTANCE FOR DISTRICTS AND NONPUBLIC SCHOOLS**

(Residential Child Care Facilities must complete the form on Attachment IV)

Please complete the following information during the annual renewal process on the Child Nutrition Management System and **retain on file** for examination by members of this Department or USDA during a review of your Child Nutrition Program. **Do not send the Certification of Acceptance to NYSED.**

**SCHOOL FOOD AUTHORITY NAME:**

**12-Digit LEA Code: \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_**

The governing body of this School Food Authority accepts this Free and Reduced Price Meal or Special Milk Program Policy Statement, including the Family Income Eligibility Criteria and all required attachments and as indicated below:

**Titles of Designated Officials**

A**.** REVIEWING OFFICIAL

Address &Telephone

B. HEARING OFFICIAL

Address & Telephone

C. VERIFICATION OFFICIAL

Address & Telephone

An officer of the Board of Education or chairman of the community school board, pastor or executive director of the corporation operating a private or parochial school, or the headmaster or principal of a nonpublic school must sign this form.

**ORIGINAL SIGNATURE OF SCHOOL OFFICIAL**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TITLE**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DATE**

2017-2018

* **The Reviewing and Verification Official may be the same person. The Hearing Official cannot be the Reviewing or Verification Official.**

 Attachment IV

|  |
| --- |
| **KEEP THIS FORM ON FILE. DO NOT RETURN TO SED** |

**CERTIFICATION OF ACCEPTANCE FOR RESIDENTIAL CHILD CARE INSTITUTIONS (RCCIs)**

Please complete the following information during the annual renewal process on the Child Nutrition Management System and **retain on file** for examination by members of this Department or USDA during a review of your Child Nutrition Program. **Do not send the Certification of Acceptance to NYSED.**

**SCHOOL FOOD AUTHORITY NAME:**

**12-Digit LEA Code: \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_**

The governing body of this School Food Authority accepts this Free and Reduced Price Meal or Special Milk Program Policy Statement, including the Family Income Eligibility Criteria and all required attachments and as indicated below:

**Titles of Designated Officials**

A**.** REVIEWING OFFICIAL

Address &Telephone

(Sections B & C are only applicable to RCCIs with day treatment students)

B. HEARING OFFICIAL

Address & Telephone

C. VERIFICATION OFFICIAL

Address & Telephone

An officer of the Board of Directors or the Executive Director must sign this form.

**ORIGINAL SIGNATURE OF SCHOOL OFFICIAL**

**TITLE**

**DATE**

2017-2018

* **The Reviewing and Verification Official may be the same person. The Hearing Official cannot be the Reviewing or Verification Official.**

Date Withdrew\_\_\_\_\_\_\_\_\_\_ **Attachment Va** F \_\_\_\_R \_\_\_\_\_D\_\_\_\_\_

**2017-2018 Application for Free and Reduced Price School Meals/Milk**

To apply for free and reduced price meals for your children, read the instructions on the back, complete **only one** form for your household, sign your name and **return it to the address listed below.** Call (*phone number),* if you need help. Additional names may be listed on a separate paper.

**Return Completed Applications to: (School Name)**

**(Street Name)**

**(City, State , Zip Code)**

1. List all children in your household who attend school:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student Name | School | Grade/Teacher | Foster Child  | Homeless Migrant, Runaway |
|  |  |  | 🞏 | 🞏 |
|  |  |  | 🞏 | 🞏 |
|  |  |  | 🞏 | 🞏 |
|  |  |  | 🞏 | 🞏 |
|  |  |  | 🞏 | 🞏 |
|  |  |  | 🞏 | 🞏 |

2. SNAP/TANF/FDPIR Benefits:

If anyone in your household receives either SNAP, TANF or FDPIR benefits, list their name and CASE # here. **Skip to Part 4, and sign the application.**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CASE #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Report all income for ALL Household Members (Skip this step if you answered ‘yes’ to step 2)

**All Household Members (including yourself and all children that have income).**

List all Household members not listed in Step 1 (including yourself) **even if they do not receive income**. For each Household Member listed, if they do receive income, report total income for each source in whole dollars only. If they do not receive income from any other source, write ‘0’. If you enter ‘0’ or leave any fields blank, you are certifying (promising) that there is no income to report.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of household member | Earnings from work before deductions***Amount / How Often***  | Child Support, Alimony***Amount / How Often*** | Pensions, RetirementPayments***Amount / How Often*** | Other Income, Social Security ***Amount / How Often***  | No Income |
|  | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | 🞏 |
|  | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | 🞏 |
|  | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | 🞏 |
|  | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | 🞏 |
|  | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | 🞏 |

I do not have a SS# 🞏

Total Household Members (Children and Adults)

|  |  |
| --- | --- |
|  |  |

 \***Last Four Digits of Social Security Number:**  XXX-XX- \_\_ \_\_ \_\_ \_\_

\*When completing section 3, an adult household member must provide the last four digits of their Social Security Number (SS#), or mark the “I do not have a SS# box” before the application can be approved.

4. Signature: An adult household member must sign this application before it can be approved.

I certify (promise) that all the information on this application is true and that all income is reported. I understand that the information is being given so the school will get federal funds; the school officials may verify the information and if I purposely give false information, I may be prosecuted under applicable State and federal laws, and my children may lose meal benefits.

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Ethnicity and Race are optional; responding to this section does not affect your children’s eligibility for free or reduced price meals.

Ethnicity: 🞏Hispanic or Latino 🞏Not Hispanic or Latino

Race: 🞏American Indian or Alaskan Native 🞏Asian 🞏Black or African American 🞏Native Hawaiian or Other Paciﬁc Island 🞏White

DO NOT WRITE BELOW THIS LINE – FOR SCHOOL USE ONLY

**Annual Income Conversion (Only convert when multiple income frequencies are reported on application)**

**Weekly X 52; Every Two Weeks (bi-weekly) X 26; Twice Per Month X 24; Monthly X 12**

 🞏 SNAP/TANF/Foster

* Income Household: Total Household Income/How Often: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Household Size: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Free Meals 🞏 Reduced Price Meals 🞏 Denied/Paid

**Signature of Reviewing Official\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date Notice Sent:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**APPLICATION INSTRUCTIONS**

To apply for free and reduced price meals, complete only one application for your household using the instructions below. Sign the application and return the application to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

If you have a foster child in your household, you may include them on your application. A separate application is no longer needed. Call the school if you need help: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Ensure that all information is provided. Failure to do so may result in denial of benefits for your child or unnecessary delay in approving your application.

**PART 1 ALL HOUSEHOLDS MUST COMPLETE STUDENT INFORMATION. DO NOT FILL OUT MORE THAN ONE APPLICATION FOR YOUR HOUSEHOLD.**

1. Print the names of the children, including foster children, for whom you are applying on one application.
2. List their grade and school.
3. Check the box to indicate a foster child living in your household, or if you believe any child meets the description for homeless,

 migrant, runaway (a school staff will confirm this eligibility).

**PART 2** **HOUSEHOLDS GETTING SNAP, TANF OR FDPIR SHOULD COMPLETE PART 2 AND SIGN PART 4.**

1. List a current SNAP, TANF or FDPIR (Food Distribution Program on Indian Reservations) case number of anyone living in your household.

 The case number is provided on your benefit letter.

1. An adult household member must sign the application in PART 4. SKIP PART 3. Do not list names of household members or income if you list a

 SNAP case number, TANF or FDPIR number.

**PART 3 ALL OTHER HOUSEHOLDS MUST COMPLETE THESE PARTS AND ALL OF PART 4.**

1. Write the names of everyone in your household, whether or not they get income. Include yourself, the children you are applying for, all other children, your spouse, grandparents, and other related and unrelated people in your household. Use another piece of paper if you need more space.
2. Write the amount of current income each household member receives, before taxes or anything else is taken out, and indicate where it came from, such as earnings, welfare, pensions and other income. If the current income was more or less than usual, write that person’s usual income. **Specify how often this income amount is received: weekly, every other week (bi-weekly), 2 x per month, monthly. If no income, check the box.** The value of any child care provided or arranged, or any amount received as payment for such child care or reimbursement for costs incurred for such care under the Child Care and Development Block Grant, TANF and At Risk Child Care Programs should **not** be considered as income for this program.
3. Enter the total number of household members in the box provided. This number should include all adults and children in the household and should reflect the members listed in PART 1 and PART 3.
4. The application must include the last four digits only of the social security number of the adult who signs **PART 4** if Part 3 is completed. If the adult does not have a social security number, check the box. **If you listed a SNAP, TANF or FDPIR number, a social security number is not needed.**
5. An adult household member must sign the application in PART 4.

**OTHER BENEFITS:** Your child may be eligible for benefits such as Medicaid or Children’s Health Insurance Program (CHIP). To determine if your child is eligible, program officials need information from your free and reduced price meal application. Your written consent is required before any information may be released. Please refer to the attached parent Disclosure Letter and Consent Statement for information about other benefits.

**USE OF INFORMATION STATEMENT**

Use of Information Statement: The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not submit all needed information, we cannot approve your child for free or reduced price meals. You must include the last four digits of the social security number of the primary wage earner or other adult household member who signs the application. The social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs.

We may share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.

**DISCRIMINATION COMPLAINTS**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) found online at: <http://www.ascr.usda.gov/complaint_filing_cust.html>, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter 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;

(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

Date Withdrew\_\_\_\_\_\_\_\_\_\_ **Attachment Vb** F \_\_\_\_R \_\_\_\_\_D\_\_\_\_\_

**2017-2018 Solicitud de Familia para las Comidas Escolares y Leche Gratis o Precios Reducidos**

Para solicitar por comidas gratuitas o precios reducidos para sus niños, lea las instrucciones en el reverse, complete este formulario para su hogar, firme su nombre y volver a. Llame si usted necesita ayuda. Nombres adicionales se pueden ser listados en un documento separado.

Devuelva aplicaciones completas a: (Nombre de Escuela)

 (Nombre de Calle)

 (Ciudad, Estado, Código postal)

1. Lista todos los niños en su hogar que asisten una escuela:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Nombre del estudiante | Escuela | Grado/Profesor(a) | Hijo/a de crianza | Sin Ingreso, Emigrante, Fugitivo  |
|  |  |  | 🞏 | 🞏 |
|  |  |  | 🞏 | 🞏 |
|  |  |  | 🞏 | 🞏 |
|  |  |  | 🞏 | 🞏 |
|  |  |  | 🞏 | 🞏 |
|  |  |  | 🞏 | 🞏 |

2. SNAP/TANF/FDPIR beneficios:

Si alguien en su hogar recibe cupones de alimentos, o beneficios de TANF o FDPIR, liste su nombre y CASO # aquí. Vaya a la parte 4, y firme la solicitud.

Nombre: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CASO #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Informe todos los ingresos para TODOS los miembros del hogar (Omita este paso si usted respondió 'sí' al paso 2)

**Todos los miembros del hogar (incluyendo a ti mismo y todos los niños que tienen ingresos).**

Lista todos los miembros de la Familia no aparece en el paso 1 (incluido usted mismo) incluso si no reciben ingresos. Por cada miembro de su familia, si no reciben ingresos, informe los ingresos totales de cada fuente en su conjunto sólo dólares. Si no reciben cualquier otra fuente de ingresos, escriba ' 0 '. Si introduce ' 0' o dejar los campos en blanco, está certificando (prometedor) que no hay informe de ingresos.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Nombre del miembro del hogar | Ganancias del trabajo antes de las deducciones***Cantidad/Frecuencia***  | La manutención de menores, pensión alimenticia***Cantidad/Frecuencia*** | Pensiones, los pagos de jubilación***Cantidad/Frecuencia*** | Otros ingresos, Seguridad Social ***Cantidad/Frecuencia*** | Sin Ingreso, Emigrante, Fugitivo  |
|  | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | 🞏 |
|  | $ \_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | 🞏 |
|  | $ \_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | 🞏 |
|  | $ \_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | 🞏 |
|  | $ \_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ | 🞏 |

No tengo un SS# 🞏

Totales miembros de la familia (niños y adultos)

|  |  |
| --- | --- |
|  |  |

 **Últimos cuatros dígitos del Numero de Seguridad Social:** XXX-XX- \_\_ \_\_ \_\_ \_\_

\* Al completar la sección 3, un miembro de adulto del hogar tiene que proveer los últimos cuatro dígitos de su número de Seguro Social (SS#), o marcar el " no tengo un numero de SS#" antes de que la aplicación puede ser aprobada.

4. Firma: Un miembro adulto del hogar tiene que firmar esta aplicación antes de que puede ser aprobado.

Certifico (prometo) que toda la información en esta aplicación es verdadera y que todos los ingresos están reportado. Entiendo que les doy esta información para que la escuela recibirá fondos federales; los funcionarios de la escuela pueden verificar la información, y si yo doy intencionalmente información falsa, puedo ser procesado bajo leyes federales y estatales aplicables, y mis hijos pueden perder beneficios de comida.

 **Firma:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Fecha:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dirección de correo electrónico: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teléfono de la casa: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Teléfono del trabajo: \_\_\_\_\_\_\_\_\_\_\_\_ Dirección de la casa:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Estamos obligados a solicitar información sobre la raza de sus niños y su origen étnico. Esta información es importante y ayudaa garantizar que servimos completamente a nuestra comunidad. Responder a esta sección es opcional y sus niños seguirán teniendo derecho a solicitar comidas escolares gratis o a precio reducido.

Grupo étnico : 🞏 Hispano o latino 🞏No hispano o latino

Raza: 🞏Indio americano o nativo de Alaska 🞏Asiático 🞏Negro o afroamericano 🞏Nativo de Hawái u otra isla del Pacífico 🞏Blanco

NO ESCRIBA DEBAJO ESTA LINEA- PARA USO DE LA ESCUELA

**Annual Income Conversion (Only convert when multiple income frequencies are reported on application)**

**Weekly X 52; Every Two Weeks (bi-weekly) X 26; Twice Per Month X 24; Monthly X 12**

 🞏 SNAP/TANF/Foster

* Income Household: Total Household Income/How Often: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Household Size: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Free Meals 🞏 Reduced Price Meals 🞏 Denied/Paid

 **Signature of Reviewing Official\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Notice Sent:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**INSTRUCCIONES DE SOLICITUD**

Para solicitar comidas gratuitas o precio reducido, llene sólo una solicitud de su hogar siguiendo las instrucciones. Firme la solicitud y envíela a\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Si tiene un hijo de crianza en su hogar, usted puede incluir en su solicitud. Llame a la escuela si necesita ayuda: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Asegure de que toda la información se proporciona. Si no lo hace puede resultar en la denegación de beneficios para su hijo o retrasos innecesarios en la aprobación de su solicitud.

**PARTE 1 TODOS LOS HOGARES NECESITEN COMPLETAR LA Información. NO LLENE MAS DE UNA SOLICITUD PARA SU HOGAR.**

1. Imprima los nombres de los niños para usted está aplicando en una sola aplicación.

 (2) Liste su grado y escuela.

 (3) Marque el bloque para indicar un hijo de crianza que vive en su hogar, o si usted cree y niño cumple con la descripción

 para personas sin hogar, migrante, o escapado de casa (personal de la escuela confirmará esta elegibilidad).

**PARTE 2** **HOGARES CON CUPONES DE ALIMENTOS, TANF O FDPIR DEBE COMPLETE PARTE 2 Y FIRME PARTE 4**

1. Liste un presente SNAP, TANF, o FDPIR (Programa de Distribución de Alimentos en Reservaciones Indígenas) caso número de alguien viviendo en su hogar. El número del caso esta proporcionado en su tarjeta de beneficios.
2. Un miembro adulto del hogar necesite firmar la solicitud en PARTE 4. Omita PARTE 3. No liste nombres de miembros del hogar o ingresos si lista un caso número de SNAP, TANF o FDPIR número.

**PARTE 3 TODOS OTROS HOGARES NECESITEN LLENAR ESAS PARTES Y TODOS DE PARTE 4.**

1. Escriba los nombres de todos en su hogar, sean o no recibe ingresos. Incluya su nombre y los niños que usted está solicitando, todos los otros niños, su marido(a), abuelos, e otras personas en su hogar (familia o no). Utilice otra hoja de papel si necesita más espacio.
2. Escriba la cantidad de ingresos Corrientes de cada miembro del hogar recibe, antes de impuestos o otras deducciones, e indique de donde vino, tales como sueldo, asistencia social, pensiones e otros ingresos. Si el ingreso corriente es más o menos del normal, indique el ingreso normal de esa persona. **Especifique la frecuencia con la cantidad de ingreso que se recibe: semanal, cada dos semanas, dos veces cada mes, o mensual.** El valor de cuidado de niños, proporcionado u arreglado, o cualquier cantidad recibida como pago por cuidado de niños o reembolso de los gastos incurridos por ese cuidado bajo de Cuidado de Niños y Subvención de Desarrollo Bloque, TANF y Programas de Cuidado de Niños de Riesgos **no** deben ser considerados como ingresos para este programa.
3. Pon el número total de miembros de la familia en la cajita. Este número debe incluir todos los adultos y niños en el hogar, y debe reflejar los miembros enumerados en parte 1 y parte 3.
4. La aplicación debe contener sólo los últimos cuatros dígitos del Numero de Seguridad Social del adulto que firme PARTE 4 si Parte 3 está llenando. Si el adulto no tenga un Numeró de Seguridad Social, marque la cajita. Si usted listó un número de SNAP, TANF o FDPIR, un número de Seguridad Social no es necesario.
5. Un miembro adulto del hogar tiene que firmar la aplicación en Parte 4.

**OTROS BENEFICIOS:** Su hijo(a) puede ser elegible por beneficios como Medicaid o Programa de Seguro Médico para Niños (PSMN). Para determinar si su hijo(a) es elegible, funcionarios del programa necesitan información desde la solicitud de comidas gratis o precio reducido. Su consentimiento escrito se requiere antes de que cualquier información pueda ser puesta en libertad. Por favor, refiérase a la Carta de Revelación Paternal y Declaración de Consentimiento para obtener información sobre otros beneficios.

**USO DE INFORMACIÓN DECLARACIÓN**

**USO DE INFORMACIÓN DECLARACIÓN**: El Richard B. Russell Ley Nacional de Almuerzo Escolar exige la información en esta solicitud. Usted no necesita dar la información, pero si no lo hace, nosotros no podemos aprobar su hijo(a) por comidas gratis o a precios reducidos. Debe incluir los últimos cuatro dígitos del número de Seguridad Social del miembro adulto asalariado primario del hogar o cualquier adulto en el hogar que firme la aplicación. Los últimos cuatro dígitos del número de Seguridad Social no son necesarios si usted está solicitando para un hijo de crianza o usted lista un numero de Cupones de Alimentos, Temporal Asistencia para Familias Necesitadas (TANF) o el Programa de Distribución de Alimentos en Reservaciones Indígenas (PDARI) u otro identificador PDARI para su niño o cuando usted indica que el miembro adulto del hogar que firma la solicitud no tiene número de Seguridad Social. Nosotros usaremos su información para determinar si su niño es elegible para recibir comidas gratis o a precio reducido, y para la administración y la ejecución de los programas de almuerzo y desayuno. Es posible que compartiremos su información de elegibilidad con programas de educación, salud, y nutrición para ayudarles a evaluar, financiar, o determinar beneficios para sus programas, auditores para revisar programas, y funcionarios del orden para ayudarles a investigar violaciones de las reglas del programa.

**QUEJAS DE DISCRIMINACIÓN**

De conformidad con la Ley Federal de Derechos Civiles y los reglamentos y políticas de derechos civiles del Departamento de Agricultura de los EE. UU. (USDA, por sus siglas en ingles), se prohíbe que el USDA, sus agencias, oficinas, empleados e instituciones que participan o administran programas del USDA discriminen sobre la base de raza, color, nacionalidad, sexo, discapacidad, edad, o en represalia o venganza por actividades previas de derechos civiles en algún programa o actividad realizados o financiados por el USDA.

Las personas con discapacidades que necesiten medios alternativos para la comunicación de la información del programa (por ejemplo, sistema Braille, letras grandes, cintas de audio, lenguaje de seas americano, etc.), deben ponerse en contacto con la agencia (estatal o local) en la que solicitaron los beneficios. Las personas sordas, con dificultades de audición o discapacidades del habla pueden comunicarse con el USDA por medio del Federal Relay Service [Servicio Federal de Retransmisión] al (800) 877-8339. Además, la información del programa se puede proporcionar en otros idiomas.

Para presentar una denuncia de discriminación, complete el [Formulario de Denuncia de Discriminacion del Programa del USDA](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) que está disponible en línea en: <http://www.ocio.usda.gov/sites/default/files/docs/2012/Spanish_Form_508_Compliant_6_8_12_0.pdf>. y en cualquier oficina del USDA, o bien escriba una carta dirigida al USDA e incluya en la carta toda la información solicitada en el formulario. Para solicitar una copia del formulario de denuncia, llame al (866) 632-9992. Haga llegar su formulario lleno o carta al USDA por:

(1) correo: U.S. Department of Agriculture

Office of the Assistant Secretary for Civil Rights

1400 Independence Avenue, SW

Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; o

(3) correo electrónico: program.intake@usda.gov.

Esta institución es un proveedor que ofrece igualdad de oportunidades.

Attachment VI

**FREE AND REDUCED PRICE MEAL APPLICATION FACT SHEET**

When filling out the application form, please pay careful attention to these helpful hints.

**SNAP/TANF/FDPIR case number:** This must be the complete valid case number supplied to you by the agency including all numbers and letters, for example, E123456, or whatever combination is used in your county. Refer to a letter you received from your local Department of Social Services for your case number or contact them for your number.

**Foster Child:** A child who is living with a family but who is under the legal care of the welfare agency or court may be listed on your family application. List the child's “personal use” income. This includes only those funds provided by the agency which are identified for the personal use of the child, such as personal spending allowances, money received by his/her family, or from a job. Funds provided for housing, food and care, medical, and therapeutic needs are not considered income to the foster child. Write “0” if the child has no personal use income.

**Household:** A group of related or non-related people who are living in one house and share income and expenses.

**Adult Family Members:** All related and non-related people who are 21 years of age and older living in your house.

**Financially Independent:** A person is financially independent and a separate economic unit/house­hold when his or her earnings and expenses are not shared by the family/household.

**Current Gross Income:** Money earned or received at the present time by each member of your household before deductions. Examples of deductions are federal tax, State tax, and Social Security deductions. If you have more than one job, you must list the income from all jobs. If you receive income from more than one source (wage, alimony, child support, etc.), you must list the income from all sources. Only farmers, self-employed workers, migrant workers, and other seasonal employees may use their income for the past 12 months reported from their 1040 Tax Forms.

Examples of gross income are:

* Wages, salaries, tips, commissions, or income from self-employment
* Net farm income – gross sales minus expenses only – not losses
* Pensions, annuities, or other retirement income including Social Security retirement benefits
* Unemployment compensation
* Welfare payments (does not include value of SNAP)
* Public Assistance payments
* Adoption assistance
* Supplemental Security Income (SSI) or Social Security Survivor's Benefits
* Alimony or child support payments
* Disability benefits, including workman's compensation
* Veteran's subsistence benefits
* Interest or dividend income
* Cash withdrawn from savings, investments, trusts, and other resources which would be available to pay for a child's meals
* Other cash income

**Income Exclusions:** The value of any child care provided or arranged, or any amount received as payment for such child care or reimbursement for costs incurred for such care under the Child Care Development (Block Grant) Fund should not be considered as income for this program.

If you have any questions or need help in filling out the application form, please contact:

Name: Title:

Telephone Number:

 Attachment VII

**Letter to Parents for School Meal Programs**

Dear Parent/Guardian:

Children need healthy meals to learn. **[Name of School]** offers healthy meals every school day. Breakfast costs **[$]**; lunch costs **[$]**. Your children may qualify for free meals or for reduced price meals. Reduced price is**$0.25** for breakfast and **$0.25**for lunch.

1. Do I need to fill out an application for each child? No. Complete the application to apply for free or reduced price meals. *Use one Free and Reduced Price School Meals Application for all students in your household.* We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to: **[name, address, phone number]**.
2. Who can get free meals? All children in households receiving benefits from **SNAP, the Food Distribution Program on Indian Reservations** or **TANF**, can get free meals regardless of your income. Also, your children can get free meals if your household’s gross income is within the free limits on the Federal Income Eligibility Guidelines.
3. CAN FOSTER CHILDREN GET FREE MEALS?Yes, foster children that are under the legal responsibility of a foster care agency or court, are eligible for free meals. Any foster child in the household is eligible for free meals regardless of income.
4. Can homeless, runaway, and migrant children get free meals? Yes, children who meet the definition of homeless, runaway, or migrant qualify for free meals. If you haven’t been told your children will get free meals, please call or e-mail **[school, homeless liaison or migrant coordinator information]** to see if they qualify.
5. WHO CAN GET REDUCED PRICE MEALS? Your children can get low cost meals if your household income is within the reduced price limits on the Federal Eligibility Income Chart, shown on this application.
6. SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE APPROVED FOR FREE MEALS? Please read the letter you got carefully and follow the instructions. Call the school at **[phone number]** if you have questions.
7. MY CHILD’S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT ANOTHER ONE? Yes. Your child’s application is only good for that school year and for the first 30 operating days of this school year. You must send in a new application unless the school told you that your child is eligible for the new school year.
8. I GET WIC. CAN MY CHILD(REN) GET FREE MEALS? Children in households participating in WIC may be eligible for free or reduced price meals. Please fill out a FREE/REDUCED PRICE MEAL application.
9. Will the information I give be checked? Yes and we may also ask you to send written proof.
10. IF I DON’T QUALIFY NOW, MAY I APPLY LATER? Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and reduced price meals if the household income drops below the income limit.
11. What if I disagree with the school’s decision about my application? You should talk to school officials. You also may ask for a hearing by calling or writing to: **[name, address, phone number, e-mail]***.*
12. May I apply if someone in my household is not a U.S. citizen?Yes. You or your child(ren) do not have to be U.S. citizens to qualify for free or reduced price meals.
13. Who should I include as members of my household? You must include all people living in your household, related or not (such as grandparents, other relatives, or friends) who share income and expenses. You must include yourself and all children living with you. If you live with other people who are economically independent (for example, people who you do not support, who do not share income with you or your children, and who pay a pro-rated share of expenses), do not include them.
14. What if my income is not always the same?List the amount that you normally receive. For example, if you normally make $1000 each month, but you missed some work last month and only made $900, put down that you made $1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
15. We are in the military. do we include our housing allowance as income?Ifyou get an off-base housing allowance, it must be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income.
16. MY SPOUSE IS DEPLOYED TO A COMBAT ZONE. IS HER COMBAT PAY COUNTED AS INCOME? No, if the combat pay is received in addition to her basic pay because of her deployment and it wasn’t received before she was deployed, combat pay is not counted as income. Contact your school for more information.
17. My family needs more help. Are there other programs we might apply for? To find out how to apply for **SNAP** or other assistance benefits, contact your local assistance office or call **1-800-342-3009**.

 **2017-2018** **INCOME ELIGIBILITY GUIDELINES**

**FOR FREE AND REDUCED PRICE MEALS OR FREE MILK**

REDUCED PRICE ELIGIBILITY INCOME CHART

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| TotalFamily Size | Annual | Monthly | Twice per Month | Every Two Weeks | Weekly |
| 1 | $ 22,311 | $ 1,860 | $ 930 | $ 859 | $ 430 |
| 2 | $ 30,044 | $ 2,504 | $ 1,252 | $ 1,156 | $ 578 |
| 3 | $ 37,777 | $ 3,149 | $ 1,575 | $ 1,453 | $ 727 |
| 4 | $ 45,510 | $ 3,793 | $ 1,897 | $ 1,751 | $ 876 |
| 5 | $ 53,243 | $ 4,437 | $ 2,219 | $ 2,048 | $ 1,024 |
| 6 | $ 60,976 | $ 5,082 | $ 2,541 | $ 2,346 | $ 1,173 |
| 7 | $ 68,709 | $ 5,726 | $ 2,863 | $ 2,643 | $ 1,322 |
| 8 | $ 76,442 | $ 6,371 | $ 3,186 | $ 2,941 | $ 1,471 |
| \*Each Add’l person add | $ 7,733 | $ 645 | $ 323 | $ 298 | $ 149 |

How to Apply: To get free or reduced price meals for your children carefully complete one application for your household and return it to the designated office. If you now receive SNAP, Temporary Assistance to Needy Families (TANF) for any children, or participate in the Food Distribution Program on Indian Reservations (FDPIR), the application must include the children's names, the household SNAP, TANF or FDPIR case number and the signature of an adult household member. All children should be listed on the same application. If you do not list a SNAP, TANF or FDPIR case number for all the children for whom you are applying, the application must include the names of everyone in the household, the amount of income each household member, and how often it is received and where it comes from. It must include the signature of an adult household member and the last four digits of that adult's social security number, or check the box if the adult does not have a social security number. An application that is not complete cannot be approved. Contact your local Department of Social Services for your SNAP or TANF case number or complete the income portion of the application.

Reporting Changes: The benefits that you are approved for at the time of application are effective for the entire school year. You no longer need to report changes for an increase in income or decrease in household size, or if you no longer receive SNAP.

Income Exclusions: The value of any child care provided or arranged, or any amount received as payment for such child care or reimbursement for costs incurred for such care under the Child Care Development (Block Grant) Fund should not be considered as income for this program.

**Nondiscrimination Statement**: This explains what to do if you believe you have been treated unfairly.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) found online at: <http://www.ascr.usda.gov/complaint_filing_cust.html>, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter 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;

(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

Meal Service to Children With Disabilities: Federal regulations require schools and institutions to serve meals at no extra charge to children with a disability which may restrict their diet. A student with a disability is defined in 7CFR Part 15b.3 of Federal regulations, as one who has a physical or mental impairment which substantially limits one or more major life activities. Major life activities are defined to include functions such as caring for one’s self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working. You must request the special meals from the school and provide the school with medical certification from a medical doctor. If you believe your child needs substitutions because of a disability, please get in touch with us for further information, as there is specific information that the medical certification must contain.

Confidentiality: The United States Department of Agriculture has approved the release of students names and eligibility status, without parent/guardian consent, to persons directly connected with the administration or enforcement of federal education programs such as Title I and the National Assessment of Educational Progress (NAEP), which are United States Department of Education programs used to determine areas such as the allocation of funds to schools, to evaluate socioeconomic status of the school's attendance area, and to assess educational progress. Information may also be released to State health or State education programs administered by the State agency or local education agency, provided the State or local education agency administers the program, and federal State or local nutrition programs similar to the National School Lunch Program. Additionally, all information contained in the free and reduced price application may be released to persons directly connected with the administration or enforcement of programs authorized under the National School Lunch Act (NSLA) or Child Nutrition Act (CNA); including the National School Lunch and School Breakfast Programs, the Special Milk Program, the Child and Adult Care Food Program, Summer Food Service Program and the Special Supplemental Nutrition Program for Women Infants and Children (WIC); the Comptroller General of the United States for audit purposes, and federal, State or local law enforcement officials investigating alleged violation of the programs under the NSLA or CNA.

Reapplication: You may apply for benefits any time during the school year. Also, if you are not eligible now, but during the school year become unemployed, have a decrease in household income, or an increase in family size you may request and complete an application at that time.

The disclosure of eligibility information not specifically authorized by the NSLA requires a written consent statement from the parent/guardian. We will let you know when your application is approved or denied.

 Sincerely,

 Attachment VIII

**Carta a padres para Programas de Comidas Escolares**

Querido padre/tutor:

Los niños necesitan comidas sanas para aprender. **[Nombre de Escuela]** ofrece comidas sanas todos los días escolares. Desayuno cuesta **[$]**; almuerzo cuesta **[$]**. Sus hijos pueden calificar para recibir comidas gratis o a precios reducidos. El precio reducido es **$0.25** para desayuno y **$0.25** para almuerzo.

1. ¿Necesito rellenar una solicitud por cada niño? No. Complete la solicitud para solicitar por comida gratis o a precio reducido. *Use una Solicitud de Comidas Escolares Gratis o a Precios Reducidos por todos los estudiantes en su hogar.* No aprobemos una solicitud incompleto, así asegúrese llenar toda la información requerida. Entregue la solicitud completa a: **[nombre, dirección, número de teléfono]**
2. ¿Quién puede recibir comidas gratis? Todos los niños en hogares que reciben beneficios de **[SNAP de Estado]**, **[el Programa de Distribución de Alimentos en Reservaciones Indígenas]** o **[TANF de Estado]**, pueden recibir comidas gratis a pesar de sus ingresos. También, sus hijos pueden recibir comidas gratis si los ingresos totales de su hogar están dentro de los límites de la Tabla Federal de Elegibilidad de Ingresos.
3. ¿Hijos de crianza pueden recibir comidas gratis? Sí, hijos de crianza que están bajo la responsabilidad legal de una agencia de cuidado de crianza o tribunal, son elegibles para recibir comidas gratis. Cualquier hijo de crianza en el hogar es elegible para recibir comidas gratis sin importar sus ingresos.
4. ¿Pueden niños sin hogar, migrantes, o fugitivos reciben comidas gratis? Si, los niños que cumplen la definición de sin hogar, migrante, o fugitivo califican para recibir comidas gratis. Si nadie se le ha dicho que sus hijos recibirán comidas gratis, por favor llame o envíe un correo electrónico a **[escuela, información de enlace sin hogar o coordinador de educación migrante]** para ver si califican.
5. ¿Quién puede recibir comidas a precios reducidos? Sus hijos pueden recibir comidas a precios reducidos si los ingresos de su hogar están dentro de los límites de precio reducido en la Tabla Federal de Elegibilidad de Ingresos, mostrada en esta solicitud.
6. ¿Debo rellenar una solicitud si he recibido una carta escolar este año que dice que mis hijos están aprobados para recibir comidas gratis? Por favor, lea la carta que recibió con cuidado y siga las instrucciones. Llame la escuela a **[número de teléfono]** si tenga preguntas.
7. La solicitud de mi hijo(a) fue aprobado el año pasado. ¿Necesito completar otra? Sí. La solicitud de su hijo(a) solo es aceptable para ese año escolar y para los primeros días de este año escolar. Usted necesita enviar una solicitud nueva a menos que la escuela le dijo que su hijo(a) es elegible por el año escolar nuevo.
8. Yo recibo WIC. ¿Mis hijos pueden recibir comidas gratis? Niños en hogares participando en WIC pueden ser elegible para recibir comidas gratis o a precios reducidos. Por favor, llene una solicitud.
9. ¿La información que doy se controla? Sí, y también podemos pedirle que envíe prueba escrita.
10. Si no califico ahora, ¿puedo solicitar más tarde? Sí, puede solicitar a cualquier tiempo durante el año escolar. Por ejemplo, niños con un padre o tutor que se haga sin empleo pueden ser elegibles para recibir comidas gratis o a precios reducidos si los ingresos del hogar caigan bajo el límite de ingresos
11. ¿Qué pasa si no estoy de acuerdo con la decisión de la escuela sobre mi solicitud? Debe hablar con funcionarios de la escuela. Además, puede pedirla por una vista por llamando o escribiendo a: **[nombre, dirección, número de teléfono, dirección de correo electrónico]**
12. ¿Puedo solicitar si alguien en mi hogar no es un ciudadano de los Estados Unidos? Sí. Usted o sus hijos no necesitan ser ciudadanos de los EE.UU. para calificar para recibir comidas gratis o a precios reducidos.
13. ¿Quién debo incluir como miembros de mi hogar? Tiene que incluir todas las personas que viven en su hogar, familia o no (como abuelos, otros parientes, o amigos) que comparten ingresos y gastos. Es necesario que incluye sí mismo y todos los niños que viven con usted. Si vive con otras personas que son independientes económicamente (por ejemplo, personas que no se apoya, que no comparten ingresos con usted o sus hijos, y que pagan una cuota prorrateada), no las incluya.
14. ¿Qué pasa si mi ingreso no es siempre igual? Apunte la cantidad que recibe normalmente. Por ejemplo, si normalmente gana $1000 cada mes, pero faltó trabajo el mes pasado y ganó $900, indique que gana $1000 cada mes. Si normalmente recibe horas extras, las incluye, pero no incluye si sólo trabaja horas extras a veces. Si usted ha perdido un trabajo o tuvo una reducción en sus horas o ganancias, utilice sus ingresos actuales.
15. Estamos en el ejército. ¿Debemos incluir nuestro subsidio de vivienda como ingreso? Si recibe un subsidio de vivienda fuera de la base militar, debe incluirlo como un ingreso. Sin embargo, si su vivienda es parte de la Iniciativa de Privatización de Viviendas para Militares usted no dede incluir el subsidio para vivienda como ingreso.
16. Mi esposo/a es desplegado en una zona de combate. ¿Es su ingreso considera como ingresos? No, si la paga por combate que se recibe en adición a su salario básico a causa de su despliegue y que no fue recibida antes de ser desplegado, la paga por combate no se considera como ingreso. Comunique con su escuela para más información.
17. Mi familia necesita más ayuda. ¿Hay otros programas que podamos solicitar? Para saber cómo solicitar **[SNAP de Estado]** u otros beneficios de asistencia, comunique con su oficina de asistencia local o llame al **[número de línea del Estado]**

**2017-2018** **Requisitos de ingresos Comidas gratis o a precio reducido o leche gratis**

Precio reducido de elegibilidad tabla de ingresos

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Tamaño total de la familia | Anual | Mensualmente | Dos veces al mes | Cada dos semanas | Semanalmente |
| 1 |  $ 22,311 |  $ 1,860 |  $ 930 |  $ 859  |  $ 430 |
| 2 |  $ 30,044  |  $ 2,504  |  $ 1,252  |  $ 1,156  |  $ 578  |
| 3 |  $ 37,777  |  $ 3,149  |  $ 1,575  |  $ 1,453  |  $ 727  |
| 4 |  $ 45,510  |  $ 3,793  |  $ 1,897  |  $ 1,751  |  $ 876  |
| 5 |  $ 53,243  |  $ 4,437  |  $ 2,219 |  $ 2,048  |  $ 1,024 |
| 6 |  $ 60,976  |  $ 5,082  |  $ 2,541  |  $ 2,346  |  $ 1,173  |
| 7 |  $ 68,709  |  $ 5,726  |  $ 2,863  |  $ 2,643  |  $ 1,322  |
| 8 |  $ 76,442  |  $ 6,371  |  $ 3,186  |  $ 2,941  |  $ 1,471  |
| \* Cada persona adicional Agregar |  $ 7,733 |  $ 645 |  $ 323 |  $ 298 |  $ 149 |

 Como aplicar: Para recibir comidas gratis o a precios reducidos para sus hijos, cuidadosamente llene una solicitud para su hogar y entréguela a la oficina designada. Si usted ahora reciba cupones de alimentos, Asistencia Temporal para Familias Necesitadas (TANF) para los hijos, o participe en el Programa de Distribución de Alimentos en Reservaciones Indígenas (FDPIR), la solicitud tiene que incluir los nombres de los niños, los cupones de alimentos del hogar, número de caso para TANF o FDPIR y la firma de un miembro adulto del hogar. Todos los niños deben estar apuntados en la misma solicitud. Si no apunta un numero de cupón de alimento, TANF o FDPIR para todos los niños para que usted está solicitando, la solicitud debe incluir los nombres de todos en el hogar, la cantidad de ingresos cada miembro del hogar, y la frecuencia con que se recibe y de donde viene. Debe incluir la firma de un miembro adulto del hogar y el número de Seguridad Social de ese adulto, o la palabra “ninguna” si el adulto no tenga un numero de Seguridad Social. Una solicitud incompleta no puede ser aprobada. Comunique con su oficina local del Departamento de Servicios Sociales para cupones de alimentos o el número de TANF o completar la porción de los ingresos de la solicitud.

 Cambios de Información: Los beneficios que usted está aprobado en el momento de la solicitud son efectivos para todo el año escolar. No es necesario informar de estos cambios en un aumento de los ingresos o una disminución en el tamaño del hogar, o si ya no recibe cupones de alimentos.

 Exclusiones de Ingresos: El valor de cuidado de niños, proporcionado u arreglado, o cualquier cantidad recibida como pago por cuidado de niños o reembolso de los gastos incurridos por ese cuidado bajo de Cuidado de Niños y Subvención de Desarrollo Bloque, TANF y Programas de Cuidado de Niños de Riesgos no deben ser considerados como ingresos para este programa.

**Declaración de no-discriminación:**

De conformidad con la Ley Federal de Derechos Civiles y los reglamentos y politicas de derechos civiles del Departamento de Agricultura de los EE. UU. (USDA, por sus siglas en ingles), se prohibe que el USDA, sus agencias, oficinas, empleados e instituciones que participan o administran programas del USDA discriminen sobre la base de raza, color, nacionalidad, sexo, discapacidad, edad, o en represalia o venganza por actividades previas de derechos civiles en algn programa o actividad realizados o financiados por el USDA.

Las personas con discapacidades que necesiten medios alternativos para la comunicacion de la informacion del programa (por ejemplo, sistema Braille, letras grandes, cintas de audio, lenguaje de seas americano, etc.), deben ponerse en contacto con la agencia (estatal o local) en la que solicitaron los beneficios. Las personas sordas, con dificultades de audicion o discapacidades del habla pueden comunicarse con el USDA por medio del Federal Relay Service [Servicio Federal de Retransmision] al (800) 877-8339. Ademas, la informacion del programa se puede proporcionar en otros idiomas.

Para presentar una denuncia de discriminacion, complete el [Formulario de Denuncia de Discriminacion del Programa del USDA](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) que esta disponible en linea en: <http://www.ocio.usda.gov/sites/default/files/docs/2012/Spanish_Form_508_Compliant_6_8_12_0.pdf>. y en cualquier oficina del USDA, o bien escriba una carta dirigida al USDA e incluya en la carta toda la informacion solicitada en el formulario. Para solicitar una copia del formulario de denuncia, llame al (866) 632-9992. Haga llegar su formulario lleno o carta al USDA por:

(1) correo: U.S. Department of Agriculture

Office of the Assistant Secretary for Civil Rights

1400 Independence Avenue, SW

Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; o

(3) correo electronico: program.intake@usda.gov.

Esta institucion es un proveedor que ofrece igualdad de oportunidades.

Servicio de Comidas para Niños con Discapacidades: Las regulaciones federales requieren que las escuelas e instituciones sirven comidas sin cargar extra a los niños con una discapacidad que puede restringir su dieta. Un estudiante con una discapacidad se define en 7CFR Parte 15b.3 de regulaciones federales, como uno que tiene un impedimento físico o mental que limita sustancialmente una o más actividades importantes de la vida. Las principales actividades de la vida se definen para incluir funciones como el cuidado, de las tareas manuales, caminar, ver, oír, hablar, respirar, aprender, y trabajar. Usted debe solicitar las comidas especiales de la escuela y proveer la escuela con la certificación médica de un doctor en medicina. Si usted cree que su niño necesita substituciones debido a su discapacidad, por favor ponerse en contacto con nosotros para obtener más información, ya que existe información específica que la certificación médica debe contener.

 Confidencialidad: Los Estados Unidos Departamento de Agricultura (USDA) ha aprobado la entrega de nombres de estudiantes y el estado de elegibilidad sin consentimiento del padre o tutor, a personas directamente relacionadas con la administración o la ejecución de los programas federales de educación tales como el Título I ya la Evaluación Nacional del Progreso Educativo (NAEP), que son los Estados Unidos programas del Departamento de Educación utiliza para determinar las áreas como la asignación de fondos a las escuelas, para evaluar la situación socioeconómica de la zona de asistencia de la escuela, y para evaluar el progreso educativo. La información también puede ser puesta en libertad a la salud del Estado o los programas locales de alimentación similar al Programa Nacional de Almuerzos Escolares. Además, toda la información contenida en la solicitud gratis o a precios reducidos puede ser entregada a personas directamente relacionadas con la administración o la ejecución de los programas autorizados por la Ley Nacional de Almuerzo Escolar o Ley de Nutrición Infantil, incluyendo el Programa de Almuerzo Escolar Nacional y Programa de Desayuno Escolar, el Programa Especial de Leche, los Niños y Adultos Programa de Alimentos, Programa de Servicio de Alimentos de Verano y el Programa Especial de Nutrición Suplementaria para Mujeres, Infantes, y Niños (WIC), la Contraloría General de los Estados Unidos para fines de auditoria, y funcionarios del orden federal, del Estado, o local investigar la presunta violación de los programas de NSLA o CNA.

La re-aplicación: Usted puede aplicar para beneficios en cualquier momento durante el año escolar. Además, si usted no es elegible ahora, pero durante el año escolar se queda sin empleo, tienen una disminución en los ingresos del hogar, o un aumento de tamaño de la familia puede solicitar y completar una aplicación durante ese tiempo.

La divulgación de la información de elegibilidad que no esté específicamente autorizada por el NSLA requiere una declaración de consentimiento escrito por el padre o tutor. Le dejaremos saber cuándo su solicitud sea aprobada o negada.

 Sinceramente,

 Attachment IX

PROTOTYPE

**Special Milk Program Schools**

**(Only for use when offering Free Special Milk)**

Dear Parent/Guardian:

(School Name) believes that one of the most important ways we can help our children perform better in their classrooms is to provide them with the nutrition necessary for the healthy growth of their minds and bodies. Therefore, we provide milk in our school every day.

We invite all students to show their support for their school food service program through frequent participation. Current milk prices are $ per one half pint.

How to Apply: To receive free milk for your children carefully complete the application and return it to the school. If you currently receive SNAP, or TANF for any children or participate in the FDPIR, the application must include the children's names of all children living in your household, your SNAP, TANF or FDPIR number and the signature of an adult household member. If you do not list a SNAP/TANF/FDPIR number, the application must include the names of everyone in the household, the amount of income for each household member, how often this income is received and where it comes from. The application must also include the signature of an adult household member and the last four digits of that adult's social security number, or check the box if the adult does not have a social security number. An application that is not complete cannot be approved. Contact your local Department of Social Services for your SNAP or TANF number or complete the income portion of the application.

Income Chart: The following chart lists income levels according to household size and income levels received either yearly, monthly or weekly. If your total household income is the same or less than the amounts on the Income Chart below, your children may be eligible for free milk.

**2017-2018 FREE ELIGIBILITY INCOME CHART**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| TotalFamily Size | Annual | Monthly | Twice per Month | Every Two Weeks | Weekly |
| 1 |  $ 15,678  |  $ 1,307 | $ 654 | $ 603 | $ 302 |
| 2 |  $ 21,112  |  $ 1,760 | $ 880 | $ 812 | $ 406 |
| 3 |  $ 26,546 |  $ 2,213  |  $ 1,107 |  $ 1,021  | $ 511 |
| 4 |  $ 31,980 |  $ 2,665 |  $ 1,333  |  $ 1,230  | $ 615 |
| 5 |  $ 37,414 |  $ 3,118 |  $ 1,559  |  $ 1,439  | $ 720 |
| 6 |  $ 42,848 |  $ 3,571  |  $ 1,786  |  $ 1,648  | $ 824 |
| 7 |  $ 48,282 |  $ 4,024 |  $ 2,012 |  $ 1,857 | $ 929 |
| 8 |  $ 53,716 |  $ 4,477 |  $ 2,239  |  $ 2,066 |  $ 1,033 |
| \*Each Add’l person add |  $ 5,434 | $ 453 | $ 227 | $ 209 | $ 105 |

Reporting Changes: The benefits that you are approved for at the time of application are effective for the entire school year. **You no longer need to report changes for an increase in income or decrease in household size, or if you no longer receive SNAP.**

Income Exclusions:The value of any child care provided or arranged, or any amount received as payment for such child care or reimbursement for costs incurred for such care under the Child Care Development (Block Grant) Fund should not be considered as income for this program.

Foster Child: Your foster child may be eligible for free milk. Provide documentation from an appropriate State or local agency indicating the child’s status as foster. If you have questions contact the school for help with the application.

**Nondiscrimination Statement:**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) found online at: <http://www.ascr.usda.gov/complaint_filing_cust.html>, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter 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;

(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

Fair Hearing: If you do not agree with the school's decision on your application or the result of verification, you may wish to discuss it with the school. You also have the right to a fair hearing. This can be done by calling or writing the following official:

**(Name, Address, Telephone Number of Hearing Official)**

Confidentiality: The United States Department of Agriculture has approved the release of students names and eligibility status, without parent/guardian consent, to persons directly connected with the administration or enforcement of federal education programs such as Title I and the National Assessment of Educational Progress (NAEP), which are United States Department of Education programs used to determine areas such as the allocation of funds to schools, to evaluate socioeconomic status of the school's attendance area, and to assess educational progress. Information may also be released to State health or State education programs administered by the State agency or local education agency, provided the State or local education agency administers the program, and federal State or local nutrition programs similar to the National School Lunch Program. Additionally, *all* information contained in the free and reduced price application may be released to persons directly connected with the administration or enforcement of programs authorized under the National School Lunch Act (NSLA) or Child Nutrition Act (CNA); including the National School Lunch and School Breakfast Programs, the Special Milk Program, the Child and Adult Care Food Program, Summer Food Service Program and the Special Supplemental Nutrition Program for Women Infants and Children (WIC); the Comptroller General of the United States for audit purposes, and federal, State or local law enforcement officials investigating alleged violation of the programs under the NSLA or CNA.

The disclosure of eligibility information not specifically authorized by the NSLA requires a written consent statement from the parent/guardian.

Reapplication: You may apply for benefits any time during the school year. Also, if you are not eligible now, but during the school year become unemployed, have a decrease in household income, or an increase in family size you may request and complete application at that time.

You will be notified when the application is approved or denied.

 Sincerely,

 Attachment X

**NOTIFICATION LETTER FOR SCHOOL MEALS**

Dear :

Your application for free and reduced price meals for your child(ren) has been:

 Approved for free meals.

 Approved for reduced price meals at cents for lunch and cents for breakfast.

 Denied for the following reason(s):

 Income over the allowable amount.

 Incomplete application. The following information is missing:

 Other:

If you do not agree with the decision, you may discuss it with a school official and you have a right to a fair hearing. This can be done by calling or writing the following official:

Name:

Address:

Phone:

You may reapply for benefits at any time during the school year. If you are not eligible now but have a decrease in household income or become unemployed, or have an increase in household size, you may fill out another application at that time.

Sincerely,

 Name Title Date

**Nondiscrimination Statement: This explains what to do if you believe you have been treated unfairly.**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) found online at: <http://www.ascr.usda.gov/complaint_filing_cust.html>, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) mail: U.S. Department of Agriculture

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(3) email: program.intake@usda.gov.

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 Attachment XI

**NOTIFICATION LETTER FOR DIRECTLY CERTIFIED STUDENTS**

Dear Parent/Guardian: Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your child(ren) has been automatically **approved for free meals and/or milk** during the 2017-2018 school year. This approval is based on student/household eligibility for the Supplemental Nutrition Assistance Program (SNAP), and/or Medicaid. **ONLY RETURN THIS LETTER to your child(ren)’s school if you do not want the free school meals/milk benefits.**

**Please DO NOT fill out an application for free or reduced price meals and/or milk for the following child(ren):**

|  |  |  |
| --- | --- | --- |
| **Student Name** | **School Name** | **Grade** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

If you have student(s) in your household that are not listed above, please contact this office at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Free meal benefits will be extended to all children residing in the same household.

**If you DO NOT want your student to receive these school meal benefits, please check the box below, sign and return this letter.**

 I do not want free meals/milk benefitsfor my children listed above

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date Signature of Parent or Guardian

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

**Nondiscrimination Statement**:

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) found online at: <http://www.ascr.usda.gov/complaint_filing_cust.html>, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) mail: U.S. Department of Agriculture

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1400 Independence Avenue, SW

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(3) email: program.intake@usda.gov.

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 Attachment XII

**CARTA DE NOTIFICACIÓN PARA ALUMNOS CON EL CERTIFICADO DIRECTAMENTE**

Querido Padre/Guardián: Fecha: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Su hijo(a) ha sido **aprobado automáticamente para comidas gratis/leche** durante el 2017-2018 año escolar. La aprobación se basa en estudiantes/hogar eligibilidad para el Programa de Asistencia de Nutrición Suplementaria (SNAP)/Medicaid. **SOLO DEVOLVER ESTA CARTA a la escuela de su(s) hijo(s) si no desea las gratis comidas escolares/leche beneficios.**

**Por favor, NO LLENE una aplicación para comidas gratis o a precio reducido y/o leche para los siguientes nino(s):**

|  |  |  |
| --- | --- | --- |
| **Nombre del Estudiante** | **Nombre de la Escuela** | **Grado** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Si usted tiene un estudiante(s) en su hogar que no está en la lista anterior, por favor póngase en contacto con esta oficina a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Beneficios de comidas gratis se extenderán a todos los niños que residen en el mismo hogar.

**Si usted NO QUIERE que su estudiante recibe estos beneficios de comidas escolares, por favor complete y devuelva la declaración de abajo a esta oficina:**

 No quiero las gratis comidas/leche beneficios para mis hijos antes mencionados

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Fecha Firma del Padre o Guardián

Sinceramente,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Firma

**Declaración de no-discriminación:**

De conformidad con la Ley Federal de Derechos Civiles y los reglamentos y politicas de derechos civiles del Departamento de Agricultura de los EE. UU. (USDA, por sus siglas en ingles), se prohibe que el USDA, sus agencias, oficinas, empleados e instituciones que participan o administran programas del USDA discriminen sobre la base de raza, color, nacionalidad, sexo, discapacidad, edad, o en represalia o venganza por actividades previas de derechos civiles en algn programa o actividad realizados o financiados por el USDA.

Las personas con discapacidades que necesiten medios alternativos para la comunicacion de la informacion del programa (por ejemplo, sistema Braille, letras grandes, cintas de audio, lenguaje de seas americano, etc.), deben ponerse en contacto con la agencia (estatal o local) en la que solicitaron los beneficios. Las personas sordas, con dificultades de audicion o discapacidades del habla pueden comunicarse con el USDA por medio del Federal Relay Service [Servicio Federal de Retransmision] al (800) 877-8339. Ademas, la informacion del programa se puede proporcionar en otros idiomas.

Para presentar una denuncia de discriminacion, complete el [Formulario de Denuncia de Discriminacion del Programa del USDA](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) que está disponible en linea en: <http://www.ocio.usda.gov/sites/default/files/docs/2012/Spanish_Form_508_Compliant_6_8_12_0.pdf>. y en cualquier oficina del USDA, o bien escriba una carta dirigida al USDA e incluya en la carta toda la informacion solicitada en el formulario. Para solicitar una copia del formulario de denuncia, llame al (866) 632-9992. Haga llegar su formulario lleno o carta al USDA por:

(1) correo: U.S. Department of Agriculture

Office of the Assistant Secretary for Civil Rights

1400 Independence Avenue, SW

Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; o

(3) correo electronico: program.intake@usda.gov.

Esta institucion es un proveedor que ofrece igualdad de oportunidades.

Attachment XIII

**(Sample Parent Letter)**

**MEAL SERVICES TO CHILDREN WITH DISABILITIES**

Dear Parent/Guardian:

Most children with disabilities have no special dietary needs. They are able to participate in the Child Nutrition Programs the same as all other children in the school. In some instances, however, children with disabilities may experience difficulty when chewing and swallowing, which would require that the physical characteristics of their foods be changed. Some children with disabilities may need special foods or a therapeutic diet.

Federal regulations require schools and institutions to serve meals at no extra charge to those children whose disability restricts their diet in such a way that they cannot fully participate in the food service program without some modification to the foods offered or the scheduled menu. If you believe your child needs substitutions because of a disability, please get in touch with us for further information. You must request the special meals from the school and provide the school with medical certification from a medical doctor. This medical certification must contain the following:

1. Verification that the special meals are needed due to the student's disability, and

2) Recommendation/prescription for alternate foods and forms of foods needed to meet the student's special dietary needs.

If you have questions regarding the need for meal modifications, contact at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for further information.

 Sincerely,

**Nondiscrimination Statement**:

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) found online at: <http://www.ascr.usda.gov/complaint_filing_cust.html>, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

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 Attachment XIV

Prototype

**PARENT/GUARDIAN CONSENT TO RELEASE ELIGIBILITY INFORMATION**

**FOR FREE AND REDUCED PRICE MEALS OR FREE MILK**

Date

Dear Parent/Guardian:

 If your child is eligible for free and reduced price meals or free milk, he/she also may be eligible for other benefits. To receive these benefits, you must provide written consent to permit school officials to give your name, address, and an indication that your household is eligible for free and reduced price meals or free milk, to representatives of certain programs. **Failure to sign a consent statement that will allow disclosure of this information will not affect your child's eligibility or participation in the school meals or milk programs.**

 Some of the programs that may request names and eligibility information to be used to provide benefits, and for which parent/guardian consent is required, include: federal health insurance programs such as Medicaid or Children's Health Insurance program (CHIP), other federal programs, State programs, local health and education programs and other local activities. For example, the disclosure of children's eligibility for free and reduced price meals or free milk to determine eligibility for free text books, free band instruments, holiday baskets, school supplies, etc., or reduced fees for summer school or driver education programs, would require written consent by the child's parent/guardian.

 If you wish to provide consent to release information contained in your child's free and reduced price meal application, to receive other benefits, please complete the attached consent statement.

Please call at if you have questions.

 Sincerely,

Enclosure (consent statement)

**Nondiscrimination Statement**:

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(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

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Attachment XV

Prototype Consent Statement (Single Program)

**CONSENT TO RELEASE FREE OR REDUCED PRICE ELIGIBILITY INFORMATION**

School officials may release information that shows that my child/children are eligible for free or reduced price meals or free milk to the following program. I understand that the information will only be provided to this program.

Name of Program (to be completed by SFA)

I understand that I will be releasing information that will show my child/children are eligible for free and reduced price meals or free milk. I give consent to release my confidential information for the above named program only.

Child/Children:

I certify that I am the parent/guardian of the child/children for whom the free/reduced price application was made:

Signature of Parent/Guardian:

Print Name:

Address:

Phone Number:

Date:

**Nondiscrimination Statement**:

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

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(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

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 Attachment XVI

Prototype Consent Statement (Multiple Programs)

**CONSENT TO RELEASE FREE OR REDUCED PRICE ELIGIBILITY INFORMATION**

School officials may release information that shows that my child/children are eligible for free or reduced price meals or free milk to the following programs. I understand that the information will only be provided to the program(s) checked.

(Check the box next to the program area(s) you wish to release information to)

* Federal health programs such as Medicaid or Children's Health Insurance Program (CHIP).
* State or federal programs such as the Youth Summer Work program or the Educational Talent Search Program.
* Local health and education programs and other local programs that provide benefits such as free textbooks or school supplies, free band instruments, or reduced fees for summer school or driver education.
* Community programs such as holiday baskets, summer arts and playground programs.

I understand that I will be releasing information that will show that my child/children are eligible for free and reduced price meals or free milk. I give consent to release my confidential information for the above named uses.

Child/Children:

I certify that I am the child's parent/guardian for whom the application was made.

Signature of Parent/Guardian:

Print Name:

Address:

Phone Number:

Date:

**Nondiscrimination Statement**:

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) found online at: <http://www.ascr.usda.gov/complaint_filing_cust.html>, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

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(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

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**CHILD NUTRITION PROGRAM ADMINISTRATION**

89 Washington Avenue, Room 375-EBA, Albany, NY 12234

NEW YORK STATE EDUCATION DEPARTMENT

(518) 473-8781 Fax (518) 473-0018

www.cn.nysed.gov

**Paula Tyner Doyle****, Coordinator**

**Sandra Sheedy****, SFPS IV**

**Kimberly Vumbaco****, SFPS IV**

|  |
| --- |
| **Steve Hanson** |
| **Eileen Becker****,** Support Staff | **Jacquelyn Bolon****,** Support Staff  |
| **Altameice Robertson-Gray****,** Support Staff | **Kacilyn Ritrovato****,** Support Staff |
| **Team 1** **Raemie Swain****, SFPS III** Kristin Junco,Erin Putnam, Caitlyn Parry, Jesse Sajdak,Linda Snyder,Elaine Reynolds, Daniel Sohotra, Jennifer Glasser**Counties**: Chautauqua, Chemung, Clinton, Cortland, Essex, Fulton, Madison, Manhattan, Oneida, Onondaga, Oswego, Putnam, Rockland, Schenectady, Tioga, Washington And Westchester | **Team 2****Jenni Knapp****, SFPS III**Meghan Usher, Shannon Rocco, Laura Matturro, Amanda Lanahan, Linda St. Pierre, Susan Adinolfe **Counties**: Broome, Cattaraugus, Chenango**,** Columbia, Delaware, Genesee, Herkimer, Nassau, Orleans,Queens, Rensselaer, Schuyler, Seneca, St. Lawrence,Suffolk, Wayne And Wyoming |
| **Team 3****Jamie McMillian****, SFPS III**Todd Bradshaw, Eric Maryzak, Karen UlrichKatie Kovage, MaryBeth Sotir, Kathryn Oliver, Nicole Clark**Counties**: Allegany, Bronx. Cayuga, Dutchess, Erie,Franklin, Greene, Hamilton, Livingston, MontgomeryNYCDOE, Otsego, Richmond, Saratoga, Tompkins, Warren and Yates | **Team 4** **Tara Webster****,** **SFPS III**Ashlene Regis-Koudoagbo, Colleen Wise, Kristin Ricciardi, Stacy Stenglein, Emily Handy, Kendra Roche, Elizabeth Hanus**Counties**: Albany, Jefferson, Kings, Lewis, Monroe, Niagara, Ontario, Orange, Schoharie, Steuben, Sullivan and Ulster |
| **SUMMER FOOD SERVICE PROGRAM** (518) 486-1086 Fax (518) 474-9920**Monica Lasher****, SFPS III** Meghan Taney,Michelle Crawford, Cady Warenda, Marisa Hutson,Eliza O’Donnell, Liza Multari **Serving all counties**(518) 486-1086 Keith Quenneville - Support Staff | **TRAINING TEAM****Michele Beaver****, SFPS III**Sarah Leavitt | **Kylie Smith, SFPS II****I**Steve Hanson |
| **AUDIT TEAM****Jeanne Day****, Associate Auditor**Wadler St. Jean, Senior AuditorAmanda Watson, Auditor Trainee |