Attachment IX

**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. No application is necessary if your household was notified by the SFA that your children have been directly certified. If you are not sure if your children have been directly certified, please contact the school.

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.

**2021-2022 FREE ELIGIBILITY INCOME CHART**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| TotalFamily Size | Annual | Monthly | Twice per Month | Every Two Weeks | Weekly |
| 1 |  $ 16,744  |  $ 1,396  |  $ 698 |  $ 644  |  $ 322  |
| 2 |  $ 22,646  | $1,888 |  $ 944  |  $ 871  |  $ 436  |
| 3 |  $ 28,548  |  $ 2,379 |  $ 1,190  |  $ 1,098  |  $ 549 |
| 4 |  $ 34,450  |  $ 2,871 |  $ 1,436 |  $ 1,325  |  $ 663 |
| 5 |  $ 40,352  |  $ 3,363  |  $ 1,682  |  $ 1,552  |  $ 776  |
| 6 |  $ 46,254  |  $ 3,855  |  $ 1,928  |  $ 1,779  |  $ 890  |
| 7 |  $ 52,156  |  $ 4,347  |  $ 2,174  |  $ 2,006  |  $ 1,003  |
| 8 |  $ 58,058  |  $ 4,839  |  $ 2,420 |  $ 2,233  |  $ 1,117 |
| \*Each Add’l person add |  $ 5,902  |  $ 492  |  $ 246 |  $ 227  |  $ 114 |

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.

In the operation of child feeding programs, no child will be discriminated against because of race, sex, color, national origin, age or disability.

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. The information submitted on the application may be subject to verification. Please contact **[name, address, phone number]** with any questions.

 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: <https://www.usda.gov/oascr/how-to-file-a-program-discrimination-complaint> 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.