

St. Catherine Academy
Application for Free & Reduced Lunches

Please return ALL application forms to the St. Catherine Academy School Office. Applications will be processed within two business days from the date of receipt. All students are Full Price until the application is fully processed.

List all children in the household (infants, children and student's through Grade 12); Attach additional page if needed

Child's Full Name	School Attending	Grade	Foster Child
_____	_____	_____	Yes No
_____	_____	_____	Yes No
_____	_____	_____	Yes No
_____	_____	_____	Yes No
_____	_____	_____	Yes No
_____	_____	_____	Yes No

List ALL members of the household who earn or receive income (including children); See sources of income listed below for assistance; Attach additional page if needed

Name of Household Member	Earnings from Work			Public Assistance / Child Support / Alimony	Check which is reported			Pensions / Retirement / Other	Check which is reported					
	Weekly	Bi-Weekly	2x Month		Weekly	Bi-Weekly	2x Month		Monthly	Weekly	Bi-Weekly	2x Month	Monthly	
_____	\$ _____			\$ _____				\$ _____						
_____	\$ _____			\$ _____				\$ _____						
_____	\$ _____			\$ _____				\$ _____						
_____	\$ _____			\$ _____				\$ _____						
_____	\$ _____			\$ _____				\$ _____						
_____	\$ _____			\$ _____				\$ _____						

Sources of Income for Children

Earning from work (child has a regular full or part-time job where they earn wages)

Public Assistance (child receives Social Security benefits)

Other (family member gives child regular spending money or receives income from a pension, annuity or trust)

Sources of Income for Adults

Earnings from work (adult receives salary, wages or cash bonuses. Net income from self-employment. Military: basic pay & bonuses, allowances for off base housing, food & clothing)

Public Assistance/Child Support/Alimony (Unemployment, worker's compensation, Supplemental Security Income, Cash Assistance from State & Local Government, Alimony, Child Support, Veteran benefits, Strike benefits)

Pensions/Retirement/Other (Social Security, Private pensions or disability benefits, regular income from trusts or estates, annuities, investment income, earned interest, rental income, regular cash payments)

Contact Information & Adult Signature

I certify (promise) that all information on this application is true and that all income is reported. I understand that school officials may request additional information to verify or check the information reported. I am aware that if I purposely give false information, my children may lose meal benefits.

Printed Name of Adult Signing Form _____

Signature of Adult Signing Form _____

Today's Date _____

Email Address for Notification _____