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- A child has a regular full or pend-time job - Social Security - Consist Security - A child is bind or deabled and necknes Social - Sun/kvor's Benefits - A child is bind or deabled and necknes Social - Sun/kvor's Benefits - A child is bind or deabled and necknes Social - A child receives Social - A child receives Social Security prendits - A child receives Social Security prendits - A child receives Social Security benefits - A child receives Social Security benefits - A child receives Social Security benefits - A child receives Social Security prendits - A child receives Social Security benefits - A child receives Social Security benefits - A child receives Social Security benefits - A child receives Social Security prendits - A child receives Social Security benefits - A child receives Social Security propriety and the pension fund, annually, or fusat regular to prevent the Social Security propriety and the security propriety and the security propriety and the security propriety and the security propriety propriety and the security propriety propriety and the security propriety propriety and the security propriety proprie	Sources of Child Income	Example(s)	Earnings from Work	Public Assistance / Allmony / Child Support	Pensions / Retirement / All Other Income
- A child is blind or disabled and receives Social Security benefits - A Parent is disabled, retired, or deceased, and their child receives Social Security benefits - A friend or extended family member regularly gives a child spending money - A child receives regular income from a private pension fund, annuity, or trust - A child receives regular income from a private pension fund, annuity, or trust - A child receives regular income from a private pension fund, annuity, or trust - A child receives regular income from a private pension fund, annuity, or trust - A child receives regular income from a private pension fund, annuity, or trust - A child receives regular income from a private pension fund, annuity, or trust - A child receives Social Security number is race and ethnicity. This information on file pension on file application. You do not alaskan Native Asian Asian Black of the information on this application. You do not approve your child for free or reduced price ecurity number. We will use your information to equired when you apply on on Assistance Program of Indian Reservations child or when you indicate that the adult household security number. We will use your information to enable, and for administration and enforcement of eligibility information with education, health, and mine benefits for their programs, auditors for hem look into violations of program rules. The A child receives Social Security number of Agriculture (USDA) civil rights regulations was, and institutions participating in or minating based on race, color, national origin, sex, ts activity in any program or activity conducted or security mineral regulations are color, national origin, sex, ts activity in any program or activity conducted or security mineral regulations.	- Earnings from work	- A child has a regular full or part-time job where they earn a salary or wages	 Salary, wages, cash bonuses 	 Unemployment benefits Worker's compensation 	 Social Security (including railroad
Income from person outside the household — A friend or extended family member regularly gives a child spending money — Basic pay and cash boruses — Honome from any other source — A child receives social spending money — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives regular income from a polither source — A child receives and explaint on a polither source — A child receives and explaint on a polither source — A child receive regular receives and the polither received in a polither received	 Social Security Disability Payments Survivor's Benefits 	 A child is blind or disabled and receives Social Security benefits A Parent is disabled, retired, or deceased, and 	 Net income from self- employment (farm or business) 	 Supplemental Security Income (SSI) Cash assistance from 	retirement and black (ung benefits) - Private pensions or disability benefits
Income from any other source A child receives regular income from a private pension fund, annuity, or rust Allowarces) Allowarces FROSA or philadeachousing Allowarces FROSA or philadeachousing Allowarces FROSA or philadeachousing Allowarces Allowarces FROSA or philadeachousing Allowarces Frequention to indicate the fact of t	-Income from person outside the household	 A friend or extended family member regularly gives a child spending money 	If you are in the U.S. Military: - Basic pay and cash bonuses (do NOT include combat pay,	government - Allmony payments - Child support payments - Veteran's benefits	rusts or estates Annuities Investment income
We are required to ask for information about your children's race and ethnicity. This information is important and helps to make sure we Responding to this section is optional and does not affect your children's reliable for the section is optional and does not affect your children's reliable for the section is optional and does not affect your children's reliable for reduced price meals. Hispanic or Latino Asian Black or African American Indian or Alaskan Native Asian or the set of the section of the set of the security number is not required when you apply on send of the set of the security number is not required when you apply on send of the set of the security number is not required when you apply on the set of the security number is not required when you apply on the set of the security number is not required when you apply on the set of the security number is not required when you apply on the set of the security number is not required when you apply on the security number is not required when you	-Income from any other source	, ,	FSSA or privatized housing allowances) - Allowances for off-base housing, food and dothing	- Strike benefits	 - Earned interest - Rental income - Regular cash payments from outside household
We are required to ask for information about your children's race and ethnicity. This information is important and helps to make sure we Responding to this section is optional and does not affect your children's eligibility for free or reduced price meals. Ethnicity (check one): Race (check one): Race (check one or more): American Indian or Alaskan Native Assian Asian Not Hispanic or Latino Not African American American Sign Language, etc.). Nation Program Sign Language, etc.). Nation Program Sign Language, etc.). Nation Program Sign Language, etc.). Not Hawaiian	OPTIONAL INVIDENTIAL TANOLES				
The Richard B. Russell National School Lunch Act requires the information on this application. You do larve to give the information, but if you do not, 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 adult household member who signs the application. The last four digits of the social security number is not required when you apply on Sastance for Needy Families (TAMF) Program or Food Distribution Program (SNAP). I emporary Assistance for Needy Families (TAMF) Program or Food Distribution Program (SNAP). I emporary Assistance for Needy Families (TAMF) Program or Food Distribution Program (SNAP). I emporary Assistance from the spinding the application does not have a social security number of indicate that the actult household represent of the function program or Food Distribution Program on Indian Reservations to the program or Food Distribution Program or Indian Reservations of the program or Pood Distribution Program or Indian Reservations of the program or Pood Distribution Program or Indian Reservations of the program or Pood Distribution Program or Indian Reservations or Form. (AD-3027) found online at http://www.ascr.usda.g. orfice, or write a letter addressed to USDA and provide in form. To request a copy of the complaint of agriculture (USDA) chill rights regulations for programs. Whe MAY share your eligibility information with education, health, and use your information to be the programs of the programs of the programs. Whe MAY share your eligibility information with education, health, and use your information to programs. Whe MAY share your eligibility information with education, health, and use your write a letter addressed to USDA and program extens and use program and the program of Agriculture (USDA) child program in e	We are required to ask for information abou Responding to this section is optional and d Ethnicity (check one): Hispanic or Lati	it your children's race and ethnicity. This infolioes not affect your children's eligibility for fre	rmation is important and helps t se or reduced price meals.	o make sure we are fully ser	rving our community.
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, we cannot approve your child for free or reduced price ingo the application. The last four digits of the social security number or program (SNAP). Temporary on behalf of a foster child or you list a Supplemental Nutrition Assistance Program on Indian Reservations. FEDER (James FDPR Identifier for your child or when hy you upply on the time signing the application does not have a social security number. We will use your information to determine if your child is slightly for free or reduced price meals, and for administration and enforcement of the Lunch and breakfast programs. We MAY share you religibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, issability, age, or reprisal or retailation for prior chil rights activity in any program or activity conducted or funded by USDA. Po not If II out 1 For School Lunch Act requires who entered sed, hard of its large print, audicitate, American Sign Language, or applied for benefits. Individuals who are deaf, hard of its funded by USDA and provide it frought nearly on the activity many program or indian Reservations to discrimination, complete in language, exity to the useful to be program or hodian Reservations the adult household enformed in thousehold or other. Federal Relay Service at (800) 877-83: available in language, exity of the complaint of the from the adult household enformed in the complaint form, call (866) USDA and p		Asian			
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 meets, 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. 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 employess, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retallation for prior civil rights activity in any program or activity conducted or funded by USDA. Do not fill out: Schraph Uses a social security number. We will use your informent of informent of administration and enforcement of fice, or write a letter addressed to USDA and provide in form. To request a copy of the complaint form, call (866 USDA by: U.S. Department of Agriculture (USDA) civil rights regulations and endivity conducted or washington, Dc. 2025 fax: (202) 890-7442; or email: program. Turded by USDA. This institution is an equal opportunity provider. Do not fill out: Schraph Uses (Bio) 10 administration and enforcement of fice of the Assistant? This institution is an equal opportunity provider. This institution is an equal opportunity provider.	The Richard B, Russell National School Lunch Act rate to give the information, but if you do not, we canot have to give the information, but if you do not, we canals. You must include the last four digits of the social segins the application. The last four digits of the social sequents of a foster child or you list a Supplemental Nutrition Sessistance for Needy Families (TANF) Program or Food (FDPIR) case number or other FDPIR identifier for your	equires the information on this application. You do unnot approve your child for free or reduced price sourify number of the adult household member who until number is not required when you apply on a Assistance Program (SNAP), Temporary I Distribution Program on Indian Reservations child or when you indicate that the adult household		Native Hawaiian or Other Pacific Islander	acilic Islander white
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•	n accordance with Federal civil rights law and U.S. Depa and policies, the USDA, its Agencies, offices, and emplo administering USDA programs are prohibited from discri disability, age, or reprisal or retallation for prior civil right funded by USDA.		lack or African American Persons with disabilities who requil large print, audiotape, American Sapplied for benefits. Individuals we through the Federal Relay Servi available in languages other than E To file a program complaint of different, (AD-3027) found online at hit office, or write a letter addressed to form. To request a copy of the com USDA by: mail chil rights complaints only to: U.3 Office.	Native Hawaiian or Other Pacific is a squire alternative means of communication for program Squire alternative means of communication for program Squire at (800) 877-8339. Additionally, program service at (800) 877-8339. Additionally, program nervice at (800) 877-8339. Additionally, program English. If discrimination, complete the USDA Program English and provide in the letter all of the information of the complaint form, call (866) 632-8992. Submit your U.S. Department of Agriculture	acrific islander verified verified verified verified verified to focal) where they speech disabilities may contact USDA program information may be made organ Discrimination Complaint ng. cust.html, and at lany USDA the information requested in the mit your completed form or letter to
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Petermining Official's Signature Date Confirming Official's Signature Date Verifying Official's Signature		rtment of Agriculture (USDA) civil rights regulations yees, and institutions participating in or minating based on race, color, national origin, sex, is activity in any program or activity conducted or activity in any program or activity conducted or every 2 Weeks x 26, Twice a Month x 24, Monthow often? State	lack or African American Persons with disabilities who requiling print, audiotaps, American Sapplied for benefits, Individuals we through the Federal Relay Sarvi available in languages other than E To file a program complaint of diffice, or write a letter addressed to form. To request a copy of the com USDA by: mall chil rights compaints only to: Using fax: fax: email: This institution is an equal opport. Categorical Eligibility Categorical Eligibility	Native Hawaiian or Other Pae atternative means of communication of Language, etc.), should conlact to are deaf, hard of hearing or have se at (800) 877-8339. Additionally, nglish. scrimination, complete the USDA Propilement of Agriculture lice of the Assistant Secretary for Civil Ondependence Avenue, SW shington, D.C. 20250-9410 2) 690-7442; or gram.intake@usda.gov. hity provider. Eligibility: Free Reacond Derind	acrific islander

Application #:
2019-2020 Application for Free and Reduced Price School Meals
Complete one application per household. Please type or use a pen (not a pencil). Available online at:

Printed name of adult signing the form	Street Address (if available)	STEP 4 Contract in Teerty (promise) that all information or false information, my children may lose		The "Sources of Income for Adults" citart will help you with the All Adult Household Members section.	The "Sources of Income for Children" chart will help you with the Child Income section.	Flip the page and review the charts titled "Sources of Income" for more information.	Are you unsure what income to include here?		STEPS Respond		STEP 2 Do any h	Reduced Price School Meals for more information.	Migrant or Runaway are eligible for free meals. Read How to Apply for Free and	children in roster care and children who meet the definition of Homeless ,	if not related."	Member: "Anyone who is living with you and shares income and expenses, even	Definition of Household	Ū.
he form	Apt#	STEP 4. Contract information and actuit signature. Wall Completed Form To: "certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, as information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws,"	Total Household Members (Children and Adults)			Name of Adult Household Members (First and Last)	b. All Adult Household Members (Including yourself) List all Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Members not listed in STEP 1 (including yourself) even if they do not receive income from any source, write '0'. If you enter '0' or leave for each source in whole dollars (no cents) only. If they do not receive income from any source, write '0'. If you enter '0' or leave	A. Child Income Sometimes children in the household earn or receive income. Please include the TOTAL income received by all Household Members listed in STEP 1 here.	reams for ALE Household Wemi	If you answered NO > Complete STEP 3.	Household Members (including you) ourrendy per	Lancourant					Child's First Name	
Signature of adult	Alio	Mail Completed Form To: Understand that this information is given in connection State and Federal laws.	Last Four Digits of Social Security Number (SSN) of Primary Wage Earner or Other Adult Household Member			Earnings from Work Weekly Bullesoly 2x Month S OOO	Jaing yourser) 1 (including yourself) even if they do not receive. If they do not receive income from any source. If they do not receive income from any source.	sceive income. Please include the TOTAL inco	els (Skip fas Stepffyou arrang	If you answered YES > Write a case number here then go to STEP 4 (Do	ione un one un						MI Child's Last Name	
	State Zip		N) of XXXX XXX			Monthly Support/Almony Weekly BA		⇔	red Yus (o.S.(EPZ)		ore of the following assistance pro		A Visit of the same				[press spacebar to advance]	
Today's date	Daylime Phone and Email (optional)	nd that school officials may verify (check) the information. I am aware that if I purposely give	Check if no SSN			B-Weekly 2x Morth Morehy All Other Income S S S S S S S S S S S S S S S S S S S	any fields blank, you are certifying (promising) that there is no income to report.	9	How often?	not complete STEP 3) Case Number:	ce programs: SNAP TANE or EDPIR? YES						School Name (Abbr.) Grade	
		ion. I am aware that if I purposely give		0000	000000	trement Weekly Baweekly Zeckorth Ameriky	total gross income (before taxes) that there is no income to report.	Monthly		Write only one case number in this space.	PR? YES NO		Che	ck all the	at apply		Student attends Migrent Worke this school district? Foster Homeless, Yes No Child Runaway	