

Application #: 2018-2019 Application for Free and Reduced Price School Meals

Available online at:

Complete one application per household. Please type or use a pen (not a pencil).

STEP 1 List ALL Household Members who are infants, children, and students up to and including Grade 12 (if more spaces are required for additional names, attach another sheet of paper)

Definition of Household Member: "Anyone who is living with you and shares income and expenses, even if not related." Children in Foster care and children who meet the definition of Homeless, Migrant or Runaway are eligible for free meals. Read How to Apply for Free and Reduced Price School Meals for more information.

Table with columns: Child's First Name, MI, Child's Last Name, School Name (Abbr.), Grade, Student attends this school district? (Yes/No), Foster Child, Homeless, Migrant, Runaway.

STEP 2 Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF, or FDPIR? YES [ ] NO [ ]

If you answered NO > Complete STEP 3. If you answered YES > Write a case number here then go to STEP 4 (Do not complete STEP 3) Case Number: [ ]

STEP 3 Report Income for ALL Household Members (Skip this step if you answered 'Yes' to STEP 2)

Are you unsure what income to include here? Flip the page and review the charts titled "Sources of Income" for more information. The "Sources of Income for Children" chart will help you with the Child Income section. The "Sources of Income for Adults" chart will help you with the All Adult Household Members section.

A. Child Income: Sometimes children in the household earn or receive income. B. All Adult Household Members (including yourself): List all Household Members not listed in STEP 1. Includes income reporting tables and checkboxes for Public Assistance/Child Support, Pensions/Retirement, and Social Security Number.

STEP 4 Contact information and adult signature. Mail Completed Form To:

"I 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, and that school officials may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws."

Form with fields for: Street Address (if available), Apt #, City, State, Zip, Daytime Phone and Email (optional), Printed name of adult signing the form, Signature of adult, Today's date.

