



SCHOOL NUTRITION

Nutrition Information For 2019-2020 School Year



Trion City Schools is excited for another great year of school nutrition with new Director, Dieni Montgomery! Dieni has over 30 years of food nutrition experience ranging from school nutrition, rehabilitation dietary needs, and catering just to name a few! She has been happily married for 36 years to her husband, Brent. Together they have four children, but only ask her about her Bassett Hound, **Luke!**

BREAK FOR BREAKFAST!

Breakfast is truly the most important meal of the day. Research indicates that students who eat breakfast daily have increased participation and perform better in school. Make sure your child remembers to break for breakfast every morning!

**Breakfast Break for High School students will be at 9:30 each morning in the Dog House!*

CAFETERIA MEAL PRICES FOR SCHOOL YEAR 2019-2020	
BREAKFAST	
All Grade Levels, Full Paying Students	\$1.40
Reduced - Price Students, with approved application (Available Online)	\$0.30 cents
Extra Student Breakfast	\$1.75
LUNCH	
Pre-K through 5th Grade, Full Paying Students	\$2.50
6th through 8th Grade, Full Paying Students	\$2.55
9th through 12th Grade, Full Paying Students	\$2.60
Reduced - Price Students, with approved application (Available Online)	\$0.40 cents
Extra Adult or Student Lunch	\$3.50

EXTRA A LA CARTE ITEMS PRICE LIST	
Extra Milk	\$0.50 cents
Tru Moo Chocolate Milk	\$1.75
YUP Milk	\$2.25
Extra Juice	\$0.50 cents
Juice 12 ounces	\$2.00
Switch	\$1.50
Plain Bottled Water	\$1.00
Smart Water	\$2.00
Vitamin Water	\$2.00
Sparkling Ice	\$2.00
Iced Tea	\$1.25
Powerade 12 ounces	\$1.50
20 ounces	\$2.00
Body Armour 16 ounces	\$2.50
Core Power Protein	\$2.75

EXTRA A LA CARTE ITEMS PRICE LIST	
Big Cookie	\$1.50
Cheez-Its	\$0.75 cents
Sides	\$0.75 cents
Fries/Tater Tots	
Small	\$0.75 cents
Large	\$1.25
Cup Cake	\$1.50
Dippin Dots	\$2.75
1 oz. Chips	\$0.75 cents
2 oz. Chips	\$1.25
Poptart	\$0.75 cents
Rice Krispy Treat	
Small	\$0.50 cents
Large	\$1.50
Donut	\$1.50
Donut Holes	\$1.50
Moon Pie	\$0.75



Friendly Bulldog Reminder...

YOU CANNOT CHARGE A LA CARTE ITEMS! You must have money in your account to purchase any **A la carte item!**

*Note A la carte items are subject to change without notice



SCHOOL NUTRITION



Nutrition Information For 2019-2020 School Year

FREE REDUCED PRICE MEALS

A Free & Reduced Meal application is attached to this information packet. You are required to apply for Free & Reduced Meals every school year.

Please SUBMIT ONE application per household. Filing more than one application will delay the processing of your application. Applications are processed **within 10 days**, after which you will receive a letter indicating your child's eligibility to receive Free & Reduced Meals.

To ensure your child receives the benefits he/she qualifies for, **please submit your application as promptly as possible.**

Please note, until your application has been processed, you will be responsible for paying for meals.

REMEMBER ONLY ONE APPLICATION PER HOUSEHOLD IS NEEDED

MY SCHOOL BOCKS - SCHOOL PAYMENTS MADE EASY!



From the cafeteria to the classroom, pay anytime, anywhere from your computer or smartphone. Sign up online at www.myschoolbucks.com. Make payments **on-the-go, check balances, view purchases**, and more!

Download the MySchoolBucks app for iOS or Android today.

PRE-PAY FOR YOUR CONVENIENCE

We offer a pre-payment system which allows you to pay for your child's meals in advance. A Pre-Pay envelope is attached to this packet and will be available from the School Nutrition Manager, or any assistant in your child's school. Please complete the information requested on the front of the envelope, enclose the money (cash or check), seal the envelope, and send the envelope with your child to give to the teacher. **Please make sure your child's name and his/her teacher's name are on the front of the envelope and that the envelope is sealed properly.** We discourage parents from sending cash or coins that are not in a sealed envelope.

EMERGENCY MEALS

If your child forgets his/her money we do allow a delayed payment for meals; however, it is only a courtesy and **is not encouraged.** We will only allow them to eat a **reimbursable meal**; they cannot charge a la carte items. **If you are experiencing financial difficulty, there are programs (free & reduced price) for which you might qualify.** If you need further information you may contact the School Nutrition Director at the contact information below.

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT:

Dieni Montgomery School Nutrition Director
deni.montgomery@trionschools.org
706-734-2991 ext. 1009 or 1010

This institution is an equal opportunity provider.

AUGUST 2019 BULL DOG DINER BREAKFAST MENU

Monday	Tuesday	Wednesday	Thursday	Friday
This institution is an equal opportunity provider	WELCOME BACK TO 2019/2020 SCHOOL YEAR FROM <u>YOUR BULL DOG DINER!</u>			Bacon, Egg & Cheese Biscuit Cereal w/ Gogurt Fresh Fruit Fruit Juice/Milk
Cereal w/ Cheese Stick Donut Fresh Fruit Fruit Juice/Milk	French Toast w/ Syrup Cereal Bar & Gogurt Fresh Fruit Fruit Juice/Milk	Stuffed Ham & Cheese Biscuit Poplart w/ Cheese Stick Fresh Fruit Fruit Juice/Milk	Chicken Biscuit Cereal & Gogurt Fresh Fruit Fruit Juice/Milk	Funnel Cake w/ Syrup Poplart w/ Cheese Sticks Fresh Fruit Fruit Juice/Milk
Chicken Biscuit Cereal w/ Gogurt Fresh Fruit Fruit Juice/Milk	Sausage Biscuit Poplart w/ Cheese Stick Fresh Fruit Fruit Juice/Milk	Bacon, Egg & Cheese Biscuit Cereal w/ Gogurt Fresh Fruit Fruit Juice/Milk	French Toast Sticks w/ Sausage Link Cereal Bar w/ Cheese Stick Fresh Fruit Fruit Juice/Milk	Cereal w/ Gogurt Stuffed Ham & Cheese Biscuit Fresh Fruit Fruit Juice/Milk
Cereal Bar w/ Cheese Stick Chicken Biscuit Fresh Fruit Fruit Juice/Milk	Stuffed Ham & Cheese Biscuit Cereal w/ Gogurt Fresh Fruit Fruit Juice/Milk	Sausage Biscuit Poplart w/ Cheese Stick Fresh Fruit Fruit Juice/Milk	Bacon, Egg & Cheese Biscuit Cereal w/ Gogurt Fresh Fruit Fruit Juice/Milk	Glazed Donut Cereal w/ Cheese Stick Fresh Fruit Fruit Juice/Milk
Chicken Biscuit Cereal & Gogurt Fresh Fruit Fruit Juice/Milk	Glazed Donut Holes Cereal Bar w/ Cheese Stick Fresh Fruit Fruit Juice/Milk	Stuffed Ham & Cheese Biscuit Poplart w/ Gogurt Fresh Fruit Fruit Juice/Milk	Chicken Biscuit Cereal & Cheese Stick Fresh Fruit Fruit Juice/Milk	Pancake on a Stick Poplart w/ Gogurt Fresh Fruit Fruit Juice/Milk

AUGUST 2019 BULL DOG DINER LUNCH MENU

Monday	Tuesday	Wednesday	Thursday	Friday
	WELCOME BACK TO 2019/2020 SCHOOL YEAR FROM <u>YOUR</u> BULL DOG DINER!	YOU ARE A RAINBOW OF POSSIBILITIES! YOU ARE WONDERFULLY MADE 		
Oven Broiled Ham & Cheese Sub or Philly Steak Sandwich w/Chips Pintos, Corn on the Cob, Green Beans, Green Salad w/Dressing, Pasta Salad, Veggies w/Dip, Fresh Fruit Variety Fruit Juice or Milk	Spaghetti w/Meat Sauce or Chicken Fettuccini Alfredo Garlic Bread, Fresh Broccoli, Spinach Parmesan, Mixed Vegetable Medley, Caesar Salad, Fresh Veggies w/Dip, Fresh Fruit Variety, Pudding w/topping Fruit Juice or Milk	Corn Dog w/Smiles or Bull Dog Pizza, Catalina Blend, Seasoned Corn, Baked Beans, Cole Slaw, Salad w/Dressing, Veggies w/Dip, Fresh Fruit Variety, Rice Krispy Treat Fruit Juice or Milk	Orange Sesame Chicken, Beef & Broccoli or Chicken Nuggets w/Roll or Spring Roll Stir Fried Rice, Asian Vegetables, Green Salad, Chow Mein Noodles, Fresh Fruit Variety, Fortune Cookie Fruit Juice or Milk	Eggs & Sausage or Bacon w/ choice of French Toast or Gravy & Biscuit Oven Roasted Taters, Cheesy Grits, Brown Sugar Oatmeal, Yogurt Parfait, Fresh Fruit Variety, Muffin or Cinnamon Roll Fruit Juice or Milk
Monday August 5	Tuesday August 6	Wednesday August 7	Thursday August 8	Friday August 9
Chicken Nuggets w/Garlic Toast or Bull Dog Pizza Broccoli w/Cheese Pintos, Green Beans, Green Salad w/Dressing, Veggies w/Dip, Fresh Fruit Variety Fruit Juice or Milk	Stacked Ham & Cheese or Grilled Cheese Sandwich Corn, Candied Carrots, Baked Beans, Pasta Salad, Shredded Lettuce, Sliced Tomato, Pickle Chips, Fresh Veggies w/Dip, Fresh Fruit Variety Fruit Juice or Milk	Eggs & Sausage or Bacon w/ choice of French Toast or Gravy & Biscuit Oven Roasted Taters, Cheesy Grits, Brown Sugar Oatmeal, Yogurt Parfait, Fresh Fruit Variety, Muffin or Cinnamon Roll Fruit Juice or Milk	Beef Burritos w/Queso, Pork Fajita, or Cheese Enchiladas Refried Beans, Corn, Fiesta Rice, Shredded Cheese, Lettuce, Tomato Salsa, Sour Cream, Jalapenos, olives, Guacamole, Fresh Fruit Variety, Cinnamon Chips Fruit Juice or Milk	Deli Turkey Wrap w/Fries or Pulled Pork BBQ Sandwich w/Fries Green Beans, Candied Carrots, Broccoli w/Cheese, Veggies w/Dip, Green Salad w/Dressing, Fresh Fruit Variety Fruit Juice or Milk
Monday August 12	Tuesday August 13	Wednesday August 14	Thursday August 15	Friday August 16
Pizza Sticks w/Marinara Sauce or Chicken Tenders w/Fries Catalina Blend, Fried Okra, Corn on the Cob, Cole Slaw, Green Salad w/Dressing, Veggies w/Dip, Fresh Fruit Variety Fruit Juice or Milk	Deli Turkey Wrap w/Fries or Pulled Pork BBQ Sandwich w/Fries Green Beans, Candied Carrots, Broccoli w/Cheese, Veggies w/Dip, Green Salad w/Dressing, Fresh Fruit Variety Fruit Juice or Milk	Bull Dog Pizza, Tortellini w/Alfredo, or Spaghetti w/Meat Sauce Mixed Vegetables, Spinach Parmesan, Fried Egg Plant, Caesar Salad, Fresh Veggies w/Dip, Fresh Fruit Variety Fruit Juice or Milk	Hamburger Pie or Macaroni & Cheese Green Beans, Roasted Potatoes, Pinto Beans, Veggies w/Dip, Salad w/Dressing, Cole slaw, Fresh Fruit Variety Fruit Juice or Milk	Beef Burritos w/Queso or Fiesta Nachos, Refried Beans, Corn, Fiesta Rice, Lettuce, Tomato, Salsa, Sour Cream, Jalapenos, olives, Guacamole, Fresh Fruit Variety, Cinnamon Chips Fruit Juice or Milk
Monday August 19	Tuesday August 20	Wednesday August 21	Thursday August 22	Friday August 23
Cheeseburger or Hot Dog w/ Fries Corn on the Cob, Baked Beans, Sauerkraut, Fresh Shredded Lettuce, Sliced Tomato, Pickle Chips, Onion slices, Pickle Relish, Fresh Fruit Variety Fruit Juice or Milk	Orange Sesame Chicken, Beef & Broccoli or Chicken Nuggets w/Roll or Spring Roll Stir Fried Rice, Asian Vegetables, Green Salad, Chow Mein Noodles, Fresh Fruit Variety, Fortune Cookie Fruit Juice or Milk	Eggs & Sausage or Bacon w/ choice of French Toast or Gravy & Biscuit Oven Roasted Taters, Cheesy Grits, Brown Sugar Oatmeal, Yogurt Parfait, Fresh Fruit Variety, Muffin or Cinnamon Roll Fruit Juice or Milk	Chicken Tenders w/Fries or Bull Dog Pizza Broccoli w/Cheese Pintos, Green Beans, Green Salad w/Dressing, Veggies w/Dip, Fresh Fruit Variety Fruit Juice or Milk	Stacked Ham & Cheese or Grilled Cheese Sandwich Corn, Candied Carrots, Baked Beans, Pasta Salad, Shredded Lettuce, Sliced Tomato, Pickle Chips, Fresh Veggies w/Dip, Fresh Fruit Variety Fruit Juice or Milk
Monday August 26	Tuesday August 27	Wednesday August 28	Thursday August 29	Friday August 30

HOW TO APPLY FOR FREE AND REDUCED PRICE SCHOOL MEALS

Please use these instructions to help you fill out the application for free or reduced price school meals. You only need to submit one application per household, even if your children attend more than one school in Trion City Schools. The application must be filled out completely to certify your children for free or reduced price school meals. Please follow these instructions in order! Each step of the instructions is the same as the steps on your application. If at any time you are not sure what to do next, please contact Dieni Montgomery, School Nutrition Director, deni.montgomery@trionschools.org, or 706-734-2991, ext 2009 or 2010.

PLEASE USE A PEN (NOT A PENCIL) WHEN FILLING OUT THE APPLICATION AND DO YOUR BEST TO PRINT CLEARLY.

STEP 1: LIST ALL HOUSEHOLD MEMBERS WHO ARE INFANTS, CHILDREN, AND STUDENTS UP TO AND INCLUDING GRADE 12

Tell us how many infants, children, and school students live in your household. They do NOT have to be related to you to be a part of your household.

Who should I list here? When filling out this section, please include ALL members in your household who are:

- Children age 18 or under AND are supported with the household's income;
- In your care under a foster arrangement, or qualify as homeless, migrant, or runaway youth;
- Students attending Trion City Schools regardless of age.

A) List each child's name. Print each child's name. Use one line of the application for each child. When printing names, write one letter in each box. Stop if you run out of space. If there are more children present than lines on the application, attach a second piece of paper with all required information for the additional children.	B) Is the child a student at? Trion City Schools Mark "Yes" or "No" under the column titled "Student" to tell us which children attend Trion City Schools if you marked "Yes", write the grade level of the student in the "Grade" column to the right.	C) Do you have any foster children? If any children listed are foster children, mark the "Foster Child" box next to the child's name. If you are ONLY applying for foster children, after finishing STEP 1, go to STEP 4. Foster children who live with you may count as members of your household and should be listed on your application. If you are applying for both foster and non-foster children, go to step 3.	D) Are any children homeless, migrant, or runaway? If you believe any child listed in this section meets this description, mark the "Homeless, Migrant, Runaway" box next to the child's name and complete all steps of the application.
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STEP 2: DO ANY HOUSEHOLD MEMBERS CURRENTLY PARTICIPATE IN SNAP, TANF, OR FDPIR?

If anyone in your household (including you) currently participates in one or more of the assistance programs listed below, your children are eligible for free school meals:

- The Supplemental Nutrition Assistance Program (SNAP)
- Temporary Assistance for Needy Families (TANF)
- The Food Distribution Program on Indian Reservations (FDPIR)

A) If no one in your household participates in any of the above listed programs: • Leave STEP 2 blank and go to STEP 3.	B) If anyone in your household participates in any of the above listed programs: • Write a case number for SNAP, TANF, or FDPIR. You only need to provide one case number. If you participate in one of these programs and do not know your case number, contact: Chattooga County DFCS. • Go to STEP 4.
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STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

How do I report my income?

- Use the charts titled "Sources of Income for Adults" and "Sources of Income for Children," printed on the back side of the application form to determine if your household has income to report.
- Report all amounts in GROSS INCOME ONLY. Report all income in whole dollars. Do not include cents.
 - Gross income is the total income received before taxes.
 - Many people think of income as the amount they "take home" and not the total, "gross" amount. Make sure that the income you report on this application has NOT been

STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

reduced to pay for taxes, insurance premiums, or any other amounts taken from your pay.

- Write a "0" in any fields where there is no income to report. Any income fields left empty or blank will also be counted as a zero. If you write "0" or leave any fields blank, you are certifying (promising) that there is no income to report. If local officials suspect that your household income was reported incorrectly, your application will be investigated.
- Mark how often each type of income is received using the check boxes to the right of each field.

3.A. REPORT INCOME EARNED BY CHILDREN

A) Report all income earned or received by children. Report the combined gross income for ALL children listed in STEP 1 in your household in the box marked "Child Income." Only count foster children's income if you are applying for them together with the rest of your household.

What is Child Income? Child income is money received from outside your household that is paid DIRECTLY to your children. Many households do not have any child income.

3.B. REPORT INCOME EARNED BY ADULTS

Who should I list here?

- When filling out this section, please include ALL adult members in your household who are living with you and share income and expenses, even if they are not related and even if they do not receive income of their own.
- **Do NOT include:**
 - People who live with you but are not supported by your household's income AND do not contribute income to your household.
 - Infants, children and students already listed in STEP 1.

B) List adult household members' names. Print the name of each household member in the boxes marked "Names of Adult Household Members (First and Last)." Do not list any household members you listed in STEP 1. If a child listed in STEP 1 has income, follow the instructions in STEP 3, Part A.	C) Report earnings from work. Report all income from work in the "Earnings from Work" field on the application. This is usually the money received from working at jobs. If you are a self-employed business or farm owner, you will report your net income. <i>What if I am self-employed?</i> Report income from that work as a net amount. This is calculated by subtracting the total operating expenses of your business from its gross receipts or revenue.	D) Report income from public assistance/child support/alimony. Report all income that applies in the "Public Assistance/Child Support/Alimony" field on the application. Do not report the cash value of any public assistance benefits NOT listed on the chart. If income is received from child support or alimony, only report court-ordered payments. Informal but regular payments should be reported as "other" income in the next part.
E) Report income from pensions/retirement/all other income. Report all income that applies in the "Pensions/Retirement/All Other Income" field on the application.	F) Report total household size. Enter the total number of household members in the field "Total Household Members (Children and Adults)." This number MUST be equal to the number of household members listed in STEP 1 and STEP 3. If there are any members of your household that you have not listed on the application, go back and add them. It is very important to list all household members, as the size of your household affects your eligibility for free and reduced price meals.	G) Provide the last four digits of your Social Security Number. An adult household member must enter the last four digits of their Social Security Number in the space provided. You are eligible to apply for benefits even if you do not have a Social Security Number. If no adult household members have a Social Security Number, leave this space blank and mark the box to the right labeled "Check if no SSN."

STEP 4: CONTACT INFORMATION AND ADULT SIGNATURE

All applications must be signed by an adult member of the household. By signing the application, that household member is promising that all information has been truthfully and completely reported. Before completing this section, please also make sure you have read the privacy and civil rights statements on the back of the application.

A) Provide your contact information. Write your current address in the fields provided if this information is available. If you have no permanent address, this does not make your children ineligible for free or reduced price school meals. Sharing a phone number, email address, or both is optional, but helps us reach you quickly if we need to contact you.	B) Print and sign your name and write today's date. Print the name of the adult signing the application and that person signs in the box "Signature of adult."	D) Share children's racial and ethnic identities (optional). On the back of the application, we ask you to share information about your children's race and ethnicity. This field is optional and does not affect your children's eligibility for free or reduced price school meals.
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2019-2020 Prototype Household Application for Free and Reduced Price School Meals

Complete one application per household. Please 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."	Child's First Name	MI	Child's Last Name	Grade	Student? Yes No	Foster Child	Homeless, Migrant, Runaway
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.							

STEP 2

Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF, or FDIPIR?

If NO > Go to STEP 3.

If YES > Write a case number here then go to STEP 4 (Do not complete STEP 3)

Case Number:

Write only one case number in this space.

STEP 3

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

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.

Child Income	How often?		
	Weekly	Bi-Weekly	Monthly
\$			

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 Member listed, if they do not receive income (before taxes) 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 any fields blank, you are certifying (promising) that there is no income to report.

Name of Adult Household Members (First and Last)	Earnings from Work			Public Assistance/Child Support/Alimony			Pensions/Retirement/All Other Income			How often?		
	Weekly	Bi-Weekly	Monthly	Weekly	Bi-Weekly	Monthly	Weekly	Bi-Weekly	Monthly	Weekly	Bi-Weekly	Monthly

Total Household Members (Children and Adults)

Last Four Digits of Social Security Number (SSN) of Primary Wage Earner or Other Adult Household Member

X	X	X	X				
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Check if no SSN

STEP 4

Contact information and adult signature.

"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."

Street Address (if available)	Apt #	City	State	Zip	Daytime Phone and Email (optional)
Printed name of adult signing the form					Today's date

INSTRUCTIONS Sources of Income

Sources of Income for Children	
Sources of Child Income	Example(s)
- Earnings from work	- A child has a regular full or part-time job where they earn a salary or wages
- 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 their child receives Social Security benefits
- Income from person outside the household	- A friend or extended family member regularly gives a child spending money
- Income from any other source	- A child receives regular income from a private pension fund, annuity, or trust

Sources of Income for Adults		
Earnings from Work	Public Assistance / Alimony / Child Support	Pensions / Retirement / All Other Income
- Salary, wages, cash bonuses - Net income from self-employment (farm or business) If you are in the U.S. Military: - Basic pay and cash bonuses (do NOT include combat pay, FSSA, or privatized housing allowances) - Allowances for off-base housing, food, and clothing	- Unemployment benefits - Worker's compensation - Supplemental Security Income (SSI) - Cash assistance from State or local government - Alimony payments - Child support payments - Veteran's benefits - Strike benefits	- Social Security (including railroad retirement and black lung benefits) - Private pensions or disability benefits - Regular income from trusts or estates - Annuities - Investment income - Earned interest - Rental income - Regular cash payments from outside household

OPTIONAL Children's Racial and Ethnic Identities

We are required to ask for information about your children's race and ethnicity. This information is important and helps to make sure we are fully serving our community. Responding to this section is optional and does not affect your children's eligibility for free or reduced price meals.

Ethnicity (check one): ☐ Hispanic or Latino ☐ Not Hispanic or Latino
Race (check one or more): ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White

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 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 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.

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, (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:

mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410
fax: (202) 690-7442; or
email: program.intake@usda.gov
This institution is an equal opportunity provider.

Do not fill out For School Use Only

Annual Income Conversion: Weekly x 52, Every 2 Weeks x 26, Twice a Month x 24, Monthly x 12

Total Income

How often?

Household Size

Weekly	Bi-Weekly	2x/Month	Monthly
☐	☐	☐	☐

Categorical Eligibility ☐

Eligibility:

Free	Reduced	Denied
☐	☐	☐

Determining Official's Signature

Date

Confirming Official's Signature

Date

Verifying Official's Signature

Date