2023-2024 Household Application for Free and Reduced Price School Meals Complete one application per household. Please use a pen (not a pencil).

Apply Online:

www.myschoolapps.com

Definition of Household	Child's First Name	Mi Child's Last Name	School Name Grade	Student? Foster Migrant, Yes No Child Runaway
Wember "Anyone who is wing with you and shares noome and expenses, even				y I
f not related." Children in Foster care and				that apply
children who meet the definition of Homeless,				ck all
Vilgrant or Runaway are eligible for free meals, Read /				Che
Reduced Price School Meals for more information.			and the state of t	
STEP 2 many to	nseholdMembers (holudingvou) corre	Boany Household Members (including you) currently participate in one on more of the following assistance programs: SNAP: TANF, or FDPIR?	IF, or FDPIRO	
	If NO > Go to STEP 3.	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
SUPPLY REPUR	Report Income for ALL Household Members (Skip this step if you answered "Yes" to STEP 2)	ifs(eftep) (1 you answered "Yes\no (∀IEP 2))		
	A. Child Income Sometimes children in the household earn or Household Members listed in STEP 1 here.	A. Child Income Child Income Cometimes children in the household earn or receive income. Please include the TOTAL income received by all the come income. Please include the TOTAL income received by all the come income.	me Weetly BHVestly 2xMonth	onth Monthly
Are you unsure what	B. All Aduit Household Members (Including yourself) List all Household Members not listed in STEP 1 (including yours	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 receive income, report total gross income (before taxes)	if they do receive income, rep	ort total gross income (before taxes)
Flip the page and review the charts titled "Sources	Name of Adult Household Members (First and Last)	How often? How often? Public Assistance/ Earryings from Wo Weekly B-Weekly 2x Month Monthly Child Support/Almony Weekly B-Weekly	How often? Pension Weekly 2x Month Monthly All Othe	Pensions/Retirement/ All Other Income Weeldy BuWeeldy 2x Month Monthly
information.		0000	0 0 \$	
The "Sources of Income for Children" chart will help you with the Child		\$	0 0	
Income section.			0 0 \$	
for Adults" chart will help you with the All Adult	THE PROPERTY OF THE PROPERTY O		• •	
Household Members section.	The second section of the second seco	\$ 0000 \$ 000	 	
NFO TO	Total Household Members (Children and Adults)	Last Four Digits of Social Security Number (SSN) of Primary Wage Earner or Other Adult Household Member	Check If no SSN	SSN
STEP 4 Contact in	Contact information and adult signature. Nati Completed Form To: 214)	ampleted Form To: 214 N. CHITZ Street, Wiggins, MS 39577		
certify (promise) that all informatic se information, my children may t	certify (promise) that all information on this application is true and that all income is reported. I understand that this information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws	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 t purposely give information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws."	officials may verify (check) the information	nation. I am aware that if I purposely give
reet Address (if available)	\Other	City	Daytime Phone and Email (optional)	nall'

Printed name of adult signing the form

Signature of adult

Today's date

	Eligibility: Free Reduced Denied	Categorical Eligibility	How often? B-Weetby 2x Month Monthly Household Size	West
		athly × 13	Every 2 Weeks y 26. Twice a Month y 24 Mo	Do not till out For School Use only Annual Income Conversion: Weekly x 52 Ex
This institution is an equal opportunity provider. This institution is an equal opportunity provider. This institution is an equal opportunity provider.	ini, a Complainant should complete a Form / Ittos://www.usda.gov/sites/default/files/docum. rany USDA office, by calling (866) 632-9992, uddress, telephone number, and a written de Secretary for Civil Rights (ASCR) about the rnust be submitted to USDA by: for Civil Rights or 42; or	To file a program discrimination complaint, a Complainant should complete which can be obtained online at: https://www.usda.gov/sites/de/abg002/2508-11-28-17Fas/2Mail_pdf , from any USDA office, by calling (86) must contain the complainant's name, address, telephone number, an sufficient detail to inform the Assistant Secretary for Civil Rights (ASC). The completed AD-3027 form or letter must be submitted to USDA by. 1. mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights (ASC). The completed AD-3027 form or letter must be submitted to USDA by 400 Independence Avenue, SW Washington, D.C. 20250-9410; or fax: (833) 268-1685 or (202) 690-7442; or small: 2. fax: (833) 268-1685 or (202) 690-7442; or small: 2. full institution is an equal opportunity provider.	e information on this application. You do not have to give free or reduced price meels. You must include the last four who signs the application. The last four digits of the social ster child or you list a Supplemental Nutrition Assistance If: Program or Food Distribution Program on Indian our child or when you indicate that the adult household unber. We will use your information to determine if your ion and enforcement of the lunch and breakfast programs, and nutrition programs to help them evaluate, fund, or is, and law enforcement officials to help them look into Agriculture (USDA) civil rights regulations and policies, and law enforcement officials to help them look into rights activity. San English. Persons with disabilities who require 1 (e.g., Bratile, large print, audiotape, American Sign at administers the program or USDA's TARGET Center at leral Relay Service at (800) 877-8339.	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 (TAMF) 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, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retailation for prior civil rights activity. Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braile, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800
acific Islander 🔲 White	Native Hawaiian or Other Pacific Islander	Black or African American	spanic or Latino ☐ Not Hispanic or Latino American Indian or Alaskan Native ☐ Asian ☐	Ethnicity (check one):
ing our community.	o make sure we are fully servi	ormation is important and helps to reduced price meals.	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.	OPMONAL Dulldren's Reclaimend Ethnic identities We are required to ask for information about your chil Responding to this section is optional and does not af
- Rental income - Regular cash payments from outside household	- Suike benefits	rosad privalized nousing allowances) - Allowances for off-base housing, food and clothing	- A child receives regular income from a private pension fund, annuity, or trust	ា ខ
trusts or estates - Annuities - Investment income - Earned interest	Alimony payments Child support payments Veteran's benefits	- Basic pay and cash bonuses (do NOT include combat pay,	- A friend or extended family member regularly gives a child spending money	-Income from person outside the household
retirement and black lung benefits) - Private pensions or disability benefits - Regular income from	 Supplemental Security Income (SSI) Cash assistance from State or local government 	 Net income from self- employment (farm or business) If you are in the U.S. Military: 	 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 	 Social Security Disability Payments Survivor's Benefits
Social Security (including railroad)	 Unemployment benefits Worker's compensation 	 Salary, wages, cash bonuses 	- A child has a regular full or part-time job where they earn a salary or wages	- Earnings from work
Pensions / Retirement / All Other Income	Public Assistance / Alimony / Child Support	Earnings from Work	Example(s)	Sources of Child Income
	Sources of Income for Adults	Ş	of Income for Children	Sources of Inc

FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED-PRICE SCHOOL MEALS

Dear Parent/Guardian:

Children need healthy meals to learn. Stone County School District offers healthy meals every school day. Breakfast costs \$1.00; lunch costs \$2.65. Your children may qualify for free meals or for reduced price meals. Reduced price is \$.30 for breakfast and \$.40 for lunch. This packet includes an application for free or reduced-price meal benefits, and a set of detailed instructions. Below are some common questions and answers to help you with the application process.

WHO CAN GET FREE OR REDUCED-PRICE MEALS?

- All children in households receiving benefits from MS SNAP, the Food Distribution Program on Indian Reservations (FDPIR) or MS TANF, are eligible for free meals.
- Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals.
- Children participating in their school's Head Start program are eligible for free meals.
- Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
- Children may receive free or reduced-price meals if your household's income is within the limits on
 the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced-price meals
 if your household income falls at or below the limits on this chart.

Scale for Reduced Price Meals									
Effective from July 1, 2023 to June 30, 2024									
Household Size	Annual	Month	Twice per	Every 2	Weekly				
-	4 30 0 3 3	4000	Month	Weeks					
1	\$ 26,973	\$ 2,248	\$ 1,124	\$1,038	\$ 519				
2	36,482	3,041	1,521	1,404	702				
3	45,991	3,833	1,917	1,769	885				
4	55,500	4,625	2,313	2,135	1,068				
5	65,009	5,418	2,709	2,501	1,251				
6	74,518	6,210	3,105	2,867	1,434				
7	84,027	7,003	3,502	3,232	1,615				
8	93,536	7,795	3,898	3,598	1,799				
For each additional									
Family member add	+9,509	+793	+397	+366	+183				

Agrees that the reduced price for lunch will not exceed 40 cents, that the reduced price for breakfast will not exceed 30 cents, that the reduced price for a snack shall not exceed 15 cents, and that the reduced price charge established will be below the full price for a lunch or breakfast or snack.

- 2. HOW DO I KNOW IF MY CHILDREN QUALIFY AS HOMELESS, MIGRANT, OR RUNAWAY? Do the members of your household lack a permanent address? Are you staying together in a shelter, hotel, or other temporary housing arrangement? Does your family relocate on a seasonal basis? Are any children living with you who have chosen to leave their prior family or household? If you believe children in your household meet these descriptions and haven't been told your children will get free meals, please call or e-mail Niki Robinson, nrobinson@stoneschools.org or 601-928-7247.
- 3. DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD? No. Use one Free and Reduced-Price School Meals Application for all students in your household. We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to: Stone County School District, Child Nutrition Department, 214 N. Critz Street, Wiggins, MS 39577 or your child's school.
- 4. SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE MEALS? No, but please read the letter you got carefully and follow the instructions. If any children in your household were missing from your eligibility notification, contact Child Nutrition Department, 601-928-7247 immediately.

- 5. CAN I APPLY ONLINE? Yes! You are encouraged to complete an online application instead of a paper application if you are able. The online application has the same requirements and will ask you for the same information as the paper application. Visit www.myschoolapps.com to begin or to learn more about the online application process. Contact Child Nutrition Department at 601-928-7247 if you have any questions about the online application.
- 6. MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT A NEW ONE? Yes. Your child's application is only good for that school year and for the first few days of this school year, through 9-14-23. You must send in a new application unless the school told you that your child is eligible for the new school year. If you do not send in a new application that is approved by the school or you have not been notified that your child is eligible for free meals, your child will be charged the full price for meals.
- 7. I GET WIC. CAN MY CHILDREN GET FREE MEALS? Children in households participating in WIC may be eligible for free or reduced-price meals. Please send in an application.
- 8. WILL THE INFORMATION I GIVE BE CHECKED? Yes. We may also ask you to send written proof of the household income you report.
- 9. IF I DON'T QUALIFY NOW, MAY I APPLY LATER? Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and reduced-price meals if the household income drops below the income limit.
- 10. WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION? You should talk to school officials. You also may ask for a hearing by calling or writing to: Jaclyn Parker, <u>iparker@stoneschools.org</u> or Child Nutrition Department, 214 N. Critz St., Wiggins, MS 39577.
- 11. MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN? Yes. You, your children, or other household members do not have to be U.S. citizens to apply for free or reduced-price meals.
- 12. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you <u>normally</u> receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
- 13. WHAT IF SOME HOUSEHOLD MEMBERS HAVE NO INCOME TO REPORT? Household members may not receive some types of income we ask you to report on the application, or may not receive income at all. Whenever this happens, please write a 0 in the field. However, if any income fields are left empty or blank, those will also be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you meant to do so.
- 14. WE ARE IN THE MILITARY. DO WE REPORT OUR INCOME DIFFERENTLY? Your basic pay and cash bonuses must be reported as income. If you get any cash value allowances for off-base housing, food, or clothing, it must also be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. Any additional combat pay resulting from deployment is also excluded from income.
- 15. WHAT IF THERE ISN'T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY? List any additional household members on a separate piece of paper, and attach it to your application. Contact your child's school or the district office to receive a second application.
- 16. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for MS SNAP or other assistance benefits, contact your local assistance office or call 601-928-4996.

If you have other questions or need help, call 601-928-7247

Sincerely,

Jaclyn Parker

Child Nutrition Director