2022-2023 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, <u>even if your</u> <u>children attend more than one school in [School District]</u>. 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 <u>EASTON PUBLIC SCHOOLS</u>, <u>BUSINESS OFFICE AT 508-205-5900</u>

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 Easton Public Schools, regardless of age.

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

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) Enter Agency ID. SNAP award letter must be attached.
- Temporary Assistance for Needy Families (TANF) Enter State TANF Number.
- The Food Distribution Program on Indian Reservations (FDPIR).

| A) If no one in your household participates in any of the above | B) If anyone in your household participates in any of the above listed programs: | | | | |
|---|---|--|--|--|--|
| listed programs: | Write the Agency ID for SNAP, TANF, or FDPIR. You only need to provide one Agency ID. If you participat | | | | |
| • Leave STEP 2 blank and go to STEP 3. | one of these programs and do not know your Agency ID, contact: -1-866-950-3663. | | | | |
| | • 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 H | IOUSEHOLD ME | MBERS | | | | | | |
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| 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 CHIL | LDREN | | | | | | | |
| 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 ADU | • | · · · · | • | | , | | | |
| 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)." <u>Do not list any</u> <u>household members you listed in STEP 1.</u> 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. What if I am self-employed? 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. Writ | - | B) Print and sign your name and | C) Mail Compl | eted | D) Share children's racial and ethnic identities | | | |
| address in the fields provided if this information is available. | | write today's date. Print the name | Form to: | C - b b - | (optional). On the back of the application, we ask you | | | |
| If you have no permanent address, this does not make your | | of the adult signing the application | Easton Public | | to share information about your children's race and | | | |
| 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. | | and that person signs in the box "Signature of adult." | Business Office 48 Spooner Str No. Easton MA | reet | ethnicity. This field is optional and does not affect your children's eligibility for free or reduced price school meals. | | | |