

Family Meal Benefit Application Form

Dear Parent or Guardian, Children need healthy meals to learn. St. Lucie County School District offers healthy meals every school day. Children may purchase breakfast and lunch at the district approved meal price for elementary k-5 and secondary 6-12th .

Your children may qualify for a benefit of free or reduce price meals. This brochure will walk you through the process of completing a family free or reduce application.

Federal Regulations require that a new application must be completed every school term. Please complete the application according to the directions and turn it into your child's school. Only one(1) application per household needs to be completed. If you are completing an application for a foster child then you will need to have a separate application for each foster child.

If you currently receive Special Supplemental Food Stamps or TANF your enrolled Child(ren) are eligible for free meals. Your Case # must be provided next to each child's name in the space provided.

You may apply for benefits at any time during the school year. If your financial circumstances change. Once approved- Benefits are good the entire school year. This does not pertain to Temporary Approvals.

COMPLETING A FAMILY FREE/REDUCE FORM

Part 1: Enter the enrolled Student's birth date, last name, first name, grade, school name and gross income including cents, that the student earns. Fill in the frequency as how the student gets paid: If no income Place an X in the "No Income" box.

Frequency Table

Weekly	W
Every other Week or Biweekly	2W
Monthly	M
Twice a Month or Semimonthly	2M

EXAMPLE: 25.60 M

75.00 M

"00" or "cent denomination" must be entered in the cent column if gross income is entered.

Part 2: Enter the Food Stamp or TANF case number next to each child in the space provided. You may skip sections (5,6, and 9)

Part 3: If your child is a foster child you must complete a separate application for each foster child. Place an **X** in section 3 if a foster child. Must provide your gross monthly income including cents in the space provided.

Part 4: If you are homeless , migrant, runaway please contact the student services office at 772-429-4524.

Place an **X** in the box : H M R.

-continue-

Part 5: Enter the last and first name of ALL people living in you household. Household means a group of related or non-related, individuals who are living as one economic unit and sharing living expenses to include: rent, clothes, food, doctor bills and utility bills. DO NOT include the names of students listed in Part 1 and DO NOT include any foster children. If the individual has no income , you MUST put an X in the box next to the individual's name. Enter the income including cents BEFORE DEDUCTIONS and fill in the appropriate pay frequency circle

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Part 6: Add together the total number of household members listed in parts 1 and 5 and enter the number.

Part 7: Enter your mailing address and telephone number.

Part 8: If you DO want information shared with school officials for other state and federal school related benefits, place an X in the box.

You must include this form along with documentation of your household income, to prove that your child/children are eligible for Free/Reduced Priced Meals.

If you were getting Food Stamps or TANF when you applied for free or reduced price meals, or at any time since then, send us a copy of one of these:

- Food Stamp or TANF Certification Notice that shows dates of certification.
- Letter from Food Stamp or Welfare Office that says you have gotten Food Stamps or TANF.
- Do not send your EBT NUMBER and/or card as proof of Food Stamps/TANF.

If you do not receive Food Stamps or TANF in your household:

Write name and social security number of each adult household member below.

Name	Social Security Numbers
_____	____-____-____
_____	____-____-____
_____	____-____-____
_____	____-____-____
_____	____-____-____
_____	____-____-____
_____	____-____-____
_____	____-____-____

Income documentation includes, but not limited to, check stubs that shows the **name** of the person who received the income, the **date** it was received, **how much** was received, and **how often** it was received. A letter from employer stating **gross wages** and how often they are paid; or for self employed, business papers, such as ledger or tax books. **Social Security, Pensions, or Retirement:** Social Security retirement benefit letter, statement of benefits received, or pension award notice. **Unemployment, Disability, or Worker's Comp:** Notice of eligibility from State employment security office, check stub, or letter from Worker's Compensation. **Child Support or Alimony:** Court decree, agreement, or copies of checks received. **Other income (such as rental income)** ledgers or tax books.

If you get this letter for a homeless, migrant or runaway child, please contact the homeless liaison @ (772) 429-6223, or migrant coordinator @ (772) 429-4639 for assistance.

If the child is a Foster Child:

Provide us with official documentation from the agency sponsoring the child.

Privacy Act Statement: 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 social security number of all adult household members. The social security number is not required when you apply on behalf of a foster child or you list a Food Stamp Program, Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier
Non-discrimination Statement: This explains what to do if you believe you have been treated unfairly. In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write to *USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington DC 20250-9410* or call 202-720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.