

2013-14
Letter to Households
National School Lunch Program/School Breakfast Program

Attachment 7
Exhibit 1
(use w/ Exhibit A)

Dear Parent/Guardian:

This letter tells how your children can get free or reduced-price meals, as well as information on other benefits. The cost of school meals is shown below.

Breakfast will be served at no cost to those children who qualify for free and reduced-price meals. Lunches will be served at no cost to children who qualify for free meals and to those who qualify for reduced-price meals in kindergarten through 3rd grade. All other students (preschool and 4th – 12th grades) will be charged the rates shown below.

Grade Level	REGULAR			REDUCED-PRICE			
	Breakfast	Lunch	Snack	Breakfast	Lunch		Snack
					K-3	All Other Students	
K-5	\$ 1.50	\$ 2.50	\$	\$ Free	\$ Free	\$.40 (4 th -5 th)	\$
6-8	\$ 1.50	\$ 2.60	\$	\$ Free	\$	\$.40 (6 th -8 th)	\$
9-12	\$ 1.50	\$ 2.85	\$	\$ Free	\$	\$.40 (9 th -12 th)	\$

WHO SHOULD FILL OUT AN APPLICATION?

Fill out the application if:

- Total household income is the SAME or LESS than the amount on the chart
- You receive Basic Food, take part in the Food Distribution Program on Indian Reservations (FDPIR), or receive Temporary Assistance for Needy Families (TANF) for your children
- You are applying for a foster child

Turn in the application to your child's school office.

Be sure to submit ONLY ONE application per household. We will notify you if the application is approved or denied. If any child you are applying for is homeless (McKinney-Vento), or migrant, check the appropriate box.

WHAT COUNTS AS INCOME? WHO IS CONSIDERED A MEMBER OF MY HOUSEHOLD?

Look at the income chart below. Find your household size. Find your total household income. If members in the household are paid at different times during the month and you are unsure if your household is eligible, fill out an application and we will determine your income eligibility for you. The information you give will be used to determine your child's eligibility for free or reduced-price meals.

Foster children are eligible for free meals regardless of personal use income. If you have questions about applying for meal benefits for foster children, please contact us at (360) 853-8141.

INCOME CHART Effective from July 1, 2013 to June 30, 2014					
Household Size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	\$21,257	\$1,772	\$ 886	\$ 818	\$ 409
2	28,694	2,392	1,196	1,104	552
3	36,131	3,011	1,506	1,390	695
4	43,568	3,631	1,816	1,676	838
5	51,005	4,251	2,126	1,962	981
6	58,442	4,871	2,436	2,248	1,124
7	65,879	5,490	2,745	2,534	1,267
8	73,316	6,110	3,055	2,820	1,410
For each additional member add:	+7,437	+620	+310	+287	+144

HOUSEHOLD is defined as all persons, including parents, children, grandparents, and all people related or unrelated who live in your home and share living expenses. If applying for a household with a foster child, you may include the foster child in the total household size.

HOUSEHOLD INCOME is considered to be the income each household member received before taxes. This includes wages, social security, pension, unemployment, welfare, child support, alimony, and any other cash income. If including a foster child as part of the household, you must also include the foster child's personal income. Do not report foster payments as income.

WHAT MUST BE ON THE APPLICATION?

A. For households not getting any assistance:

- Student's name
- Names of all household members
- Income by source for all household members
- Adult household member's signature
- Last 4 digits of social security number of the adult household member who signs the application, (or check the "I do not have a social security number" box if the adult signing does not have a social security number)

Complete Parts 1, 2, 3, and 4. Parts 5 and 6 are optional.

B. For a household with only a foster child(ren):

- Student's name
- Adult household member's signature

Complete Parts 1 and 4. Parts 5 and 6 are optional. You may also send the school a copy of the court documentation showing the foster child(ren) was placed with you instead of filling out an application form.

C. For household with a foster child(ren) and other children:

Apply as a household and include foster children. Follow the directions for "A. Households not getting any assistance" and include the foster child's personal use income.

D. For a family getting Basic Food/TANF/FDPIR:

- List all student names and case number where appropriate
- If the student is not the one with a case number, enter the household member's name and their case number
- Adult household member's signature

Complete Parts 1 and 4. Parts 5 and 6 are optional.

FOSTER CHILDREN: HOW DO I APPLY FOR FOSTER CHILDREN?

With the proper documentation, foster children are now eligible for free school meals. If applying for a foster child(ren) only, proper documentation means you may fill out the attached application for free meals or you may send a copy of the court paperwork showing the child is a ward of the state and has been placed in your home. If you are also applying for your own children, you will fill out a free and reduced-price meals application and include all members in the household. If the foster child has any personal income, be sure to indicate this in the appropriate spot on the application form. It is important to realize that although the foster child will be categorically eligible for free meals, the other students in your household may be eligible for free or reduced-price meals or may not qualify for meal benefits at all based on household size and income.

WHAT IF I'M NOT RECEIVING BASIC FOOD DOLLARS?

If you have been approved for Basic Food but do not actually receive Basic Food dollars, you must apply for free and reduced-price meal benefits by filling out a meal application and returning it to your child's school.

DO MY CHILDREN AUTOMATICALLY QUALIFY IF THEY HAVE A CASE NUMBER?

Yes. Children on TANF or Basic Food may get free meals without the household having to complete an application. These children are identified by the school using a data matching process. TANF and Basic Food staff at the Department of Social and Health Services (DSHS) sends a list of children on these programs to the Office of Superintendent of Public Instruction (OSPI). OSPI matches the children on this list to our list of enrolled students that your child's school has reported to us. This matched list is then made available to your child's school food service staff. The students on this list get free meals if their schools have the free and reduced-price breakfast and/or lunch program (not all schools do). Please contact us immediately if you feel your children should be receiving free meals and are not.

If you do not want your child to participate in the free meal programs using this method, please notify the school.

IF ANYONE IN MY HOUSEHOLD HAS A CASE NUMBER, WILL ALL CHILDREN QUALIFY FOR FREE MEALS?

Yes. If someone else in the household has a case number, other than a student or a foster child, you must fill out an application and send it to your student's school. Please contact us immediately if you feel other children in your household should be receiving free meals and are not.

BASIC FOOD – CAN I QUALIFY FOR ASSISTANCE IN BUYING FOOD?

Basic Food is the state's food stamp program. It helps households make ends meet by providing monthly benefits to buy food. Getting Basic Food is easy! You can apply in person at the local DSHS Community Service Office, by mail, or online. There are other benefits too. You can learn about Basic Food by calling 1-877-501-2233 or by logging on to http://www.foodhelp.wa.gov/basic_food.htm.

WE ARE IN THE MILITARY. DO WE INCLUDE OUR HOUSING ALLOWANCE AS INCOME?

If you get an off-base housing allowance, it must be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income.

APPLE HEALTH FOR KIDS (FREE OR LOW-COST HEALTH COVERAGE)

If you would like information about Apple Health for Kid's free or low-cost health coverage for your children, please call to request an application at toll free 1-877-543-7669 or fill out and print an application online at: <http://www.hca.wa.gov/applehealth/Pages/default.aspx>. Apple Health for Kids may include health coverage for doctor visits, prescriptions, hospital, dental care, eyeglasses, and more. Even if your child has other health coverage, they may still be eligible for help with the monthly premium, co-pays, or deductibles.

WHAT IF MY CHILD NEEDS SPECIAL FOODS?

All meals served meet the federal food guidelines. Students who are identified as disabled by their doctor may need different foods. These substitute foods will be made available at no extra charge if your child's doctor fills out the necessary paperwork. If your child needs this assistance, please contact us.

PROOF OF ELIGIBILITY

The information you provide may be verified at any time. You may be asked to send additional information to prove your child is eligible to receive free and reduced-price meals.

FAIR HEARING

If you do not agree with the decision on your child's application or the process used to prove income eligibility, you may talk with Danna Rogers, the fair hearing official. You have the right to a fair hearing which may be arranged by calling the school/school district at this number (360) 853-8141.

REAPPLICATION

You may apply for benefits any time during the school year. If you should have a decrease in household income, an increase in household size, or become unemployed, or receive Basic Food, TANF, or FDPIR, you may be eligible for benefits and may fill out an application at that time.

NONDISCRIMINATION

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.

If you believe you have been treated unfairly, you may file a complaint of discrimination by writing, USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer.