



## CHILD NUTRITION SERVICES

### Brandon Valley School District 49-2

2001 South Sioux Boulevard, Brandon, SD 57005-1705  
(605) 582-3926

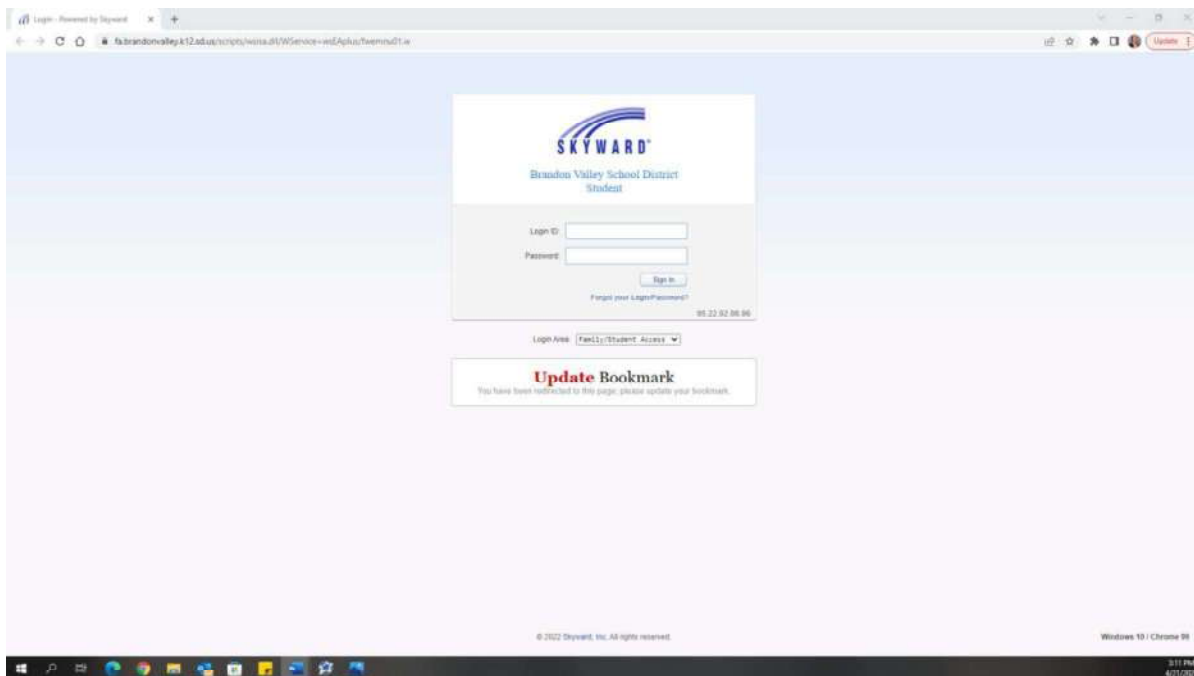
### Completing Free/Reduced Application via Family Access Skyward Account

1. Log into Family Access from any Brandon Valley building website. **If you do not have a Family Access account, OR do not know your login information, contact your student's building secretary or the Brandon Valley Administration Center.** Contact information for all building included below.

Brandon Valley Administration Center	582-2049
Brandon Elementary School	582-6315
Robert Bennis Elementary School	582-8010
Fred Assam Elementary School	582-1500
Inspiration Elementary School	582-8590
Brandon Valley Intermediate School	582-6035
Brandon Valley Middle School	582-3214
Brandon Valley High School	582-3211

Link to Family Access Skyward:

<https://fa.brandonvalley.k12.sd.us/scripts/wsisd.dll/WService=wsEApplus/fwemnu01.w>



2. If you have more than one student in your account, select **only one**. You must select a student to reach the application. Applications will not be available if your student drop down says 'ALL STUDENTS'.

**Important Note:** Although applications are completed under a specific student, **only ONE application needs to be completed PER FAMILY.**

Family Access  
WELL F. STUDENT

Home  
New Student Online Enrollment  
Ethnicity/Race  
Calendar  
Gradebook  
Attendance  
Student Info  
Food Service  
Schedule  
Discipline  
Portfolio  
Login History

Ethnicity and Race have not been Validated!  
Ethnicity and Race for WELL needs to be reviewed and validated.

Child Nutrition Updates  
Dear Parents/Guardians,  
As the first day of school approaches, we are excited to see students back in the lunchroom! Please read below for child nutrition information that may impact your student.

**Free and Reduced Applications:** Applications for the 2022-23 school year are open! If you believe your family meets the income eligibility criteria to qualify for this benefit, please complete the application. Applications are available online through Family Access on Skyward. Instructions for completing these applications can be found on the Child Nutrition Services webpage under "Free and Reduced". Please note: Free and Reduced Applications for school meals are based on income eligibility. This process does not guarantee free meals for students.

**Meal Accommodation Requests:** If you have a student that requires special meal accommodations for any reason (such as allergies or other medical condition), a Meal Change Request form must be completed. This form should be completed and signed by a medical provider and returned to the Child Nutrition Department for accommodations to be made. If you have previously completed a form for a previous school year, an updated form is required for the 2022-23 school year. Please contact BVSD Registered Dietitian Alison Eddy (alison.eddy@k12.sd.us) if you need a form or have questions. We look forward to another great year at BVSD and thank you for the privilege of allowing the Child Nutrition Department to feed your students.

Please feel free to contact our office at any time regarding the Child Nutrition Program.

Thank you,  
Andrea Knuse, MS, RD, LN  
Brandon Valley School District, Child Nutrition Director  
Phone: (661) 562-3926  
Email: andrea.knuse@k12.sd.us

This institution is an equal opportunity provider.

Upcoming Events  
Calendar  
Fri Jan 12, 2024  
Term 2 Ends  
Brandon Elementary School  
Fri Jan 12, 2024  
TERM 2 Ends  
Valley Springs Elementary  
Mon Jan 15, 2024  
IN-SERVICE--NO SCHOOL  
Valley Springs Elementary  
Mon Jan 15, 2024  
Term 3 Starts  
Brandon Elementary School  
Tue Jan 16, 2024  
TERM 3 Starts  
Valley Springs Elementary

3. Select the Food Service tab along the left side of the screen.

Family Access  
WELL F. STUDENT

Home  
New Student Online Enrollment  
Ethnicity/Race  
Calendar  
Gradebook  
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TERM 3 Starts  
Valley Springs Elementary

4. Once in Food Service tab, select 'Applications', then 'Add Application'. Do not select 'Print Application'. Application should be completed **online**, paper applications will only be accepted if obtained directly from CNS department offices. Applications printed from Skyward will not be accepted.

Family Access  
**WELL F. STUDENT**

WELL MOTHERMy AccountEmail HistoryExit

[Home](#)  
[New Student Online Enrollment](#)  
[Ethnicity/Race](#)  
[Calendar](#)  
[Gradebook](#)  
[Attendance](#)  
[Student Info](#)  
**[Food Service](#)**  
[Schedule](#)  
[Discipline](#)  
[Portfolio](#)  
[Login History](#)

### Food Service

**Current Account Balance**  
Family: \$0.00  
Lunch Type: NORMAL LUNCH (PAID)

**Today's Lunch Menu**  
No lunch menu details are available for the current date.

**Lunch Calendar**

WELL (Brandon Elementary School) [View Totals](#) | [Make a Payment](#)

There are no payment records for this student.

**Applications**

**Weekly Purchases For:** Thu Apr 21, 2022

[Previous Week](#) [Next Week](#)

WELL (Brandon Elementary School)

**Set Purchase Limit**

Week Total: \$0.00

Key Pad Number: 330431

Item	Price
<b>Sun Apr 17, 2022</b>	
No purchases for this date.	
<b>Mon Apr 18, 2022</b>	
No purchases for this date.	
<b>Tue Apr 19, 2022</b>	
No purchases for this date.	
<b>Wed Apr 20, 2022</b>	
No purchases for this date.	
<b>Thu Apr 21, 2022</b>	
No purchases for this date.	

**Food Service Applications**

[Pending Application](#) [Add Application](#) | [Print Application](#)

No pending application was found.

WELL (001)

Temp Application	Application Date	Effective Date	Dependents	Lunch Code	Denied?	Active?	Application Nbr
No	Fri Jul 30, 2021	Mon Jan 1, 1900	0	NORMAL	No	Yes	



Home

New Student  
Online  
Enrollment

Ethnicity/Race

Calendar

Gradebook

Attendance

Student Info

**Food Service**

Schedule

Discipline

Portfolio

Login His

### Food Service

#### Current Account Balance

Family: \$0.00  
Lunch Type: NORMAL  
LUNCH (PAID)

#### Today's Lunch Menu

No lunch menu details are available for the current date.

1

[Applications](#)

[Lunch Calendar](#)

WELL (Brandon Elementary School) [View Totals](#) | [Make a Payment](#)

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[Previous Week](#)

[Next Week](#)

WELL (Brandon Elementary School)

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Week Total: \$0.00

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Item	Price
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No purchases for this date.

Mon Apr 18, 2022

No purchases for this date.

Tue Apr 19, 2022

### Food Service Applications

[Pending Application](#) | [Add Application](#) | [Print Application](#)

No pending application was found.

WELL (001)

Temp Application	Application Date	Effective Date	Dependents	Lunch Code	Denied?	Active?	Application Nbr
No	Fri Jul 30, 2021	Mon Jan 1, 1900	0	NORMAL	No	Yes	

Sat Apr 23, 2022

No purchases for this date.

5. After selecting 'Add Application', the application will open. Review the Letter to Parents before continuing through the application process. Once it has been reviewed, select 'Next' (upper right-hand corner).

Application for Free and Reduced Price Meals

Steps: Letter to Parents, Instructions for Applying, Federal Income Chart, Privacy Act Statement, Non-discrimination Statement, Application, Review and Submit

**1** Review

**2** Next

Letter to Parents  
Link to USDA Translated Household Applications: <https://www.fns.usda.gov/cntr/translated-applications>

Dear Parent/Guardian:

Children need healthy meals to learn. The Brandon Valley School District offers healthy meals to all enrolled children at no additional cost. USDA provides reimbursements for healthy meals and snacks served to children enrolled in the school/campus. Please help us comply with the requirements of the Program by completing the attached Application for Free/Reduced-price Meals. By filling out this form, we will be able to determine if we can claim meals served to your child(ren) at the free or reduced-price rate. 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.

1. WHO CAN GET FREE OR REDUCED-PRICE MEALS?

- All children in households receiving benefits from SNAP, the Food Distribution Program on Indian Reservations (FDPIR) or TANF are eligible for free meals.
- Foster child on that is 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 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.

FEDERAL INCOME CHART  
For School Year 2021-22

Household Size	Yearly	Monthly	Weekly
1	23,628	1,969	459
2	32,327	2,694	620
3	40,626	3,386	782
4	49,022	4,084	943
5	57,424	4,786	1,105
6	65,823	5,486	1,266
7	74,322	6,186	1,428
8	82,621	6,886	1,589

Each Additional Person:  
6,399 700 162

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 own 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 at or email at: [redacted]

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: [redacted]

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 the district right away on those children get benefits, too.

5. 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. You must send in a new application unless the school told you that your child is eligible for the new school year.

6. I GET MEDICARE OR MEDICAID. CAN MY CHILDREN GET FREE MEALS? Children in households participating in WIC or Medicaid may be eligible for free or reduced-price meals. Please send in an application.

7. WILL THE INFORMATION I GIVE BE CHECKED? Yes. We may ask you to send written proof of the household income you report.

8. 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.

9. 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.

10. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you normally 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.

11. 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, these will also be counted as zeros. Please be careful when leaving income fields blank, as we will assume you meant to do so.

12. WHAT IF MY INCOME CHANGES DURING THE YEAR OR MY SNAP, TANF OR FDPIR BENEFITS CHANGE? If your application for free or reduced-price benefits was properly approved, you will remain eligible for those benefits for an allotted time period. You may visit with a school/campus official to get the most date the meal benefits will expire.

13. 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. Family Subsistence Supplemental Allowance (FSSA) payments and any additional combat pay resulting from deployment are also excluded from income.

14. WILL YOU TELL ANYONE ELSE ABOUT THE INFORMATION ON MY FORM? We will use the information on your form to decide if your children should get free or reduced-price meals. We may inform officials associated with other child nutrition, health, and education programs of the information on your form to determine benefits for those programs or for funding and/or evaluation purposes.

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.

16. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? Contact your local Department of Social Services, assistance office to find out how to apply for SNAP or TANF.

8:45 AM  
4/25/2022



6. Thoroughly read the 'Instructions for Applying'. Once instructions have been reviewed, select the box shown to acknowledge instructions. Once complete, select 'Next'.

**Application for Free and Reduced Price Meals**

**Steps**

- Letter to Parents
- Instructions for Applying
- Federal Income Chart
- Privacy Act Statement
- Non-discrimination Statement
- Application
- Review and Submit

**Application**

- Part 1: Child Name
- Part 2: Benefits
- Part 3: Child Status
- Part 4: Gross Income
- Part 5: Signature
- Part 6: Ethnicity and Race

**Review and Submit**

**1 Review**

**2 Acknowledge**

**3**

**Next**

**Print**

**Back**

**Non-discrimination Statement:** This explains what to do if you believe you have been treated unfairly. 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 marital or marital status in any program or activity conducted or funded by USDA.

**FEDERAL INCOME CHART**

For School Year 2022-23

Household Size	Yearly	Monthly	Weekly
1	23,628	1,969	459
2	32,277	2,690	620
3	40,636	3,386	782
4	49,025	4,085	942
5	57,424	4,786	1,105
6	65,823	5,488	1,268
7	74,222	6,189	1,431
8	82,621	6,889	1,594

Each Additional Person: 8,399 / 700 / 182

7. Review the Federal Income Chart. Once completed, select 'Next', or select the box stating 'I do not qualify for benefits or do not wish to complete an application'.  
*\*Selecting the box on this page will delete your application and exit you from the open screen.*

**Application for Free and Reduced Price Meals**

**Steps**

- Letter to Parents
- Instructions for Applying
- Federal Income Chart
- Privacy Act Statement
- Non-discrimination Statement
- Application
- Review and Submit
- Acknowledge

**Application**

- Part 1: Child Name
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## 8. Review the 'Privacy Act Statement'. Once completed, select 'Next'.

The screenshot shows a web browser window with the URL <https://k12.sd.us/scripts/ntics.dll/WService=webEplus/efm/seedin020.w>. The page title is "Application for Free and Reduced Price Meals". The left sidebar lists the steps: Letter to Parents, Instructions for Applying, Federal Income Chart, Privacy Act Statement (highlighted with a red box and a red '1'), Non-discrimination Statement, Application (Parts 1-6), and Review and Submit. The main content area is titled "Privacy Act Statement: This explains how we will use the information you give us." and contains text about the Richard B. Russell National School Lunch Act. At the top right, there are buttons for "2 Apply" (highlighted with a red box), "Next", "Print", and "Back". A red "Review" label is overlaid on the left sidebar.

## 9. Review the 'Non-discrimination Statement'. Once completed, select 'Next'.

The screenshot shows the same web browser window, but the page title is "Application for Free and Reduced Price Meals" and the URL is <https://k12.sd.us/scripts/ntics.dll/WService=webEplus/efm/seedin020.w>. The left sidebar lists the steps: Letter to Parents, Instructions for Applying, Federal Income Chart, Privacy Act Statement, Non-discrimination Statement (highlighted with a red box and a red '1'), Application (Parts 1-6), and Review and Submit. The main content area is titled "Non-discrimination Statement: This explains what to do if you believe you have been treated unfairly." and contains text about the U.S. Department of Agriculture (USDA) civil rights regulations. At the top right, there are buttons for "2 Apply" (highlighted with a red box), "Next", "Print", and "Back". A red "Review" label is overlaid on the left sidebar.

10. Use the table to add children's names. Be thorough in completing this section. All fields are required, complete this section for **all students** within the Brandon Valley School District. Once all student name(s), age(s), school(s), and grade(s) have been entered, select 'Next'.

\*Should you need additional lines to add more students, select the box 'Add More Names to Application'.

\*\*Note there is a box to check if a student living in your house is a foster child.

Application for Free and Reduced Price Meals

Steps: Application for Free and Reduced Price Meals

Part 1: Children's Names

☐ Add More Names to Application

\*Select if additional lines are needed.

☐ New Applicant ☐ Previous Applicant

Legal Name of Child (First Name, Middle Initial, Last Name)	Age	School or Center	Grade	Check if a Foster Child
(Example) Student A. Smith		School Name	04	<input type="checkbox"/>
Student A. Test	5	Test Elementary School	KG	<input type="checkbox"/>
Student B. Test	10	Test Elementary School	04	<input type="checkbox"/>
Student C. Test	14	Test Middle School	08	<input type="checkbox"/>
Student D. Test	17	Test High School	11	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

1 Complete

2 Next

11. If you currently receive SNAP, TANF, or FDIPIR benefits, please enter your case number. **Case number must be current.** If you do not receive these benefits, leave the boxes blank and select 'Next'.

Application for Free and Reduced Price Meals

Steps: Application for Free and Reduced Price Meals

Part 2: Households receiving SNAP, TANF, or FDIPIR: If any member of your household is NOW receiving SNAP, TANF, and/or FDIPIR, list the CASE NUMBER. Fill out Sections 4, 2, and 3. The application MUST have the signature of an adult.

SNAP Case Number:  TANF Case Number:  FDIPIR Case Number:

1 Complete, if applicable

2 Next



12. If the student is homeless, migrant, or runaway, please select the appropriate box. If the student does not fall under these categories, leave the boxes blank and select 'Next'.

Application for Free and Reduced Price Meals

Part 3. Is this child a migrant, homeless, or runaway?  
If the child you are applying for is homeless, migrant, or a runaway, check the appropriate box and call your school's homeless liaison or migrant coordinator.

Child Status: ☐ Homeless ☐ Migrant ☐ Runaway

Complete, if applicable

Next

13. The next section of this application requires **ALL** household members **AND their income** to be listed. Student names from the Part 1, will be copied into this section. Select 'OK' to enter household member names.

Application for Free and Reduced Price Meals

Part 4. Total Household Income from Last Month - You must tell us how much and how often (if everyone in household).

☐ Add More Names to Application

A. Full Legal Name (First Name, Middle Initial, Last Name)	B. Income - Tell how much you get each pay day and how often you get paid. (2)							C. Check if No Income
	Earnings from Work Before Deductions	Wages	Child Support, Alimony	Pensions, Retirement, Social Security	Family/Other (2)			
(Example) June A. Smith	\$199.99	W	\$149.99	R	\$99.99	M	\$20.00	Y
Student A, Test	\$0.00	W	\$0.00	W	\$0.00	W	\$0.00	Y
Student B, Test	\$0.00	W	\$0.00	W	\$0.00	W	\$0.00	Y
Student C, Test	\$0.00	W	\$0.00	W	\$0.00	W	\$0.00	Y
Student D, Test	\$0.00	W	\$0.00	W	\$0.00	W	\$0.00	Y
	\$0.00	W	\$0.00	W	\$0.00	W	\$0.00	Y
	\$0.00	W	\$0.00	W	\$0.00	W	\$0.00	Y

Application Helper:  
Based on the household information provided, household names were copied into this section. Please review each name and remove based on application instructions if necessary.

OK

14. Complete the table, adding additional household members. **ALL individuals living in the home must be included (this includes all adults, students, and children).**

**\*Please note: ALL HOUSEHOLD MEMBERS AND THEIR INCOME MUST BE INCLUDED.**

**\*\*If an individual has no income, you MUST check the box in the last column of the table.**

Once all names AND incomes have been entered, select 'Next'.

**\*Should you need additional lines to add more students, select the box 'Add More Names to Application'.**

Application for Free and Reduced Price Meals - Entry 001 - 05/22/2020 08 - (Google Chrome)

Application for Free and Reduced Price Meals

Steps: 1. Application for Free and Reduced Price Meals

Letter to Parents  
Instructions for Applying  
Federal Income Chart  
Privacy Act Statement

Non-discrimination Statement

Application

- Part 1: Child Names
- Part 2: Benefits
- Part 3: Child Status
- Part 4: Gross Income
- Part 5: Signatures
- Part 6: Ethnicity and Race

Review and Submit

Part 4 - Total Household Income from Last Month - You must tell us how much and how often List everyone in household.

☒ Add More Names to Application

**2** Next Print Back

**1**

A. Full Legal Name (First Name, Middle Initial, Last Name)	B. Income - list how much you get each pay day and how often you get paid	C. Check if No Income			
	Earnings from Work Before Deductions	Welfare, Child Support, Alimony, Pensions, Retirement, Social Security	Farm/Other		
(Example) Jane A. Smith	\$199.00	\$140.00	\$99.00	\$50.00	
Student A. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student B. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student C. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student D. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student E. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student F. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student G. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student H. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student I. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student J. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student K. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student L. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student M. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student N. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student O. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student P. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student Q. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student R. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student S. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student T. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student U. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student V. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student W. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student X. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student Y. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Student Z. Test	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>

**Complete**

**NOTE: ALL MEMBERS OF THE HOUSEHOLD AND INCOMES MUST BE INCLUDED IN THIS SECTION.**

15. Complete the last section. The name must be printed as it appears on the household income section (previous step). The last four digits of your social security number are also required (or select 'I do not have a SSN'). Address, phone number, and email are optional but highly encouraged. Once information is entered, select 'Click to Sign'.

Application for Free and Reduced Price Meals

Part 5: Signature and Social Security Number (Adult must sign)

I certify (promise) that all information on this application is true and that all income is from legal sources, and I may be prosecuted.

\* Sign here:  Click to Sign

\* Print Name: Mother Test

\* Last Four Digits of SSN: 1234 OR ☐ I do not have a SSN

Address:  City:  State:  Zip Code:

Work Telephone:  Email Address:

By providing your email address, you may be notified by email of your eligibility for free and reduced price school meals.

16. After selecting 'Click to Sign', you will be prompted to acknowledge the Electronic Signature Agreement. When this pops up, select 'I Agree'. Then select 'Next'.

Application for Free and Reduced Price Meals

Part 5: Signature and Social Security Number (Adult must sign)

I certify (promise) that all information on this application is true and that all income is from legal sources, and I may be prosecuted.

\* Sign here:  Click to Sign

\* Last Four Digits of SSN: 1234 OR ☐ I do not have a SSN

Address:  City:  State:  Zip Code:

Work Telephone:  Email Address:

By providing your email address, you may be notified by email of your eligibility for free and reduced price school meals.

Electronic Signature Agreement

Under the Federal Electronic Signatures in Global and National Commerce Act, before you may submit this Food Service Account Application electronically, you must be provided with certain of the following information and you must affirmatively agree to the following and thereafter not withdraw your agreement.

Please take a moment to review and acknowledge your understanding and acceptance of this Agreement. By electronically signing this Food Service Account Application, I acknowledge receipt of the application agreement, and I agree to be bound by the terms and conditions of the agreement.

By clicking 'I Agree' and submitting this agreement via the internet, I acknowledge that:

- I have read and understand the foregoing Electronic Signature Agreement and that I intend to be bound thereby.
- I understand and agree that my electronic signature is the equivalent of a manual signature and that others may rely on it as such in connection with any and all agreements I may enter into, including but not limited to this Electronic Signature Agreement.
- I further acknowledge and agree that it is my obligation to immediately advise the school district of any change in my electronic address (i.e., email address).
- I further acknowledge and agree that it is my obligation to immediately advise the school district in the event that I withdraw my consent to this Electronic Signature Agreement.
- I acknowledge and agree that, in the event that any person known to me (whether it be a family member, member of my household or otherwise) misappropriates any of the security devices connected with my Food Service account application and such misappropriation could not reasonably be detected by the school district, the school district shall have the right to treat all resulting electronic signatures as though they were affixed by the person whose name is typed below.
- I acknowledge and agree that the individual completing this electronic account application is the individual in whose name the account is set up, or is someone authorized to submit this application by the person whose name is on the account.

I Agree

Next

17. Select your Ethnic and Racial Identities. This step is optional. If you choose to enter this information, first select the box marked 'I would like to report this optional information', then complete the bottom section. If you would like to skip this step, select 'Next'.

Complete, if desired

18. Review the completed application and all information on the final screen. If all information is correct, select 'Submit Application'. Applications will not be considered until they are submitted.

*\*Please Note: Selecting 'Submit Application' is the final step in the application process. You MUST select this option for applications to be officially completed.*

Legal Name of Child First Name, Middle Initial, Last Name	Age	School or Center	Grade	Check if a Foster Child
Student A. Test	5	Test Elementary School	KG	<input type="checkbox"/>
Student B. Test	10	Test Elementary School	04	<input type="checkbox"/>
Student C. Test	14	Test Middle School	08	<input type="checkbox"/>
Student D. Test	17	Test High School	11	<input type="checkbox"/>

19. After submitting, the following message will show. This is confirmation that you have successfully completed and submitted an application. *If you do not see this message, the application was not received.* Select 'OK', to exit the application.



20. NOTE: If at any point you exit the application or need to stop, you can continue the application later by selecting 'Food Service' → 'Applications' → 'Continue Application'.

