HOW TO APPLY FOR FREE AND REDUCED PRICE SCHOOL MEALS for 2017-18 School Year

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 [St. Mary Catholic Schools]</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. If at any time you are not sure what to do next, please contact **Anne Greif 900 Geiger St Neenah**, **WI 54956 920-967-0107** <u>Agreif@smcatholicschools.org</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, or enrolled in a Head Start program; and
- Students attending [St. Mary Catholic Schools], regardless of age.

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STEP 2: DO ANY HOUSEHOLD MEMBERS CURRENTLY PARTICIPATE IN FoodShare, W-2 Cash Benefits 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) or FoodShare.
- Temporary Assistance for Needy Families (TANF) or W-2 Cash Benefits.
- The Food Distribution Program on Indian Reservations (FDPIR).

A) If no one in your household participates in any of the	B) If anyone in your household participates in any of the above listed programs:		
above listed programs:	• Write a case number for FoodShare, W-2 Cash Benefits, or FDPIR. You only need to provide one case number.		
• Leave STEP 2 blank and go to STEP 3.	If you participate in one of these programs and do not know your case number, contact your case worker.		
	Please note, a BadgerCare case number does NOT qualify for free meals.		
	• Go to STEP 4.		

STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

How do I report my income?

- Use the charts titled "Sources of Income for Children" and "Sources of Income for Adults," 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 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 circles to the right of each field.					
3.A. REPORT INCOME EARNED BY CHILDREN					
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 personal 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 ADULTS					
List adult household members' names.					
• Print the name of each household member in the boxes marked "Name of Adult Household Members (First and Last)." 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.					
C) Report earnings from work. Report all total gross income (before taxes) from work in the "Earnings from Work" field on		blic assistance/child support/alim			
the application. This is usually the money received from working		es in the "Public Assistance/Child	h Report all income that applies in the		
at jobs. If you are a self-employed business or farm owner, you					
will report your net income.	value of any public assistance benefits NOT listed on the chart. If"Pensions/Retirement/ All Other Income" fieldincome is received from child support or alimony, only report court-on the application.				
. ,	ordered payments. Informal but regular payments should be				
What if I am self-employed? Report income from that work as a					
net amount. This is calculated by subtracting the total operating	g				
expenses of your business from its gross receipts or revenue.					
F) Fluctuating Income. For seasonal workers and others whose					
income fluctuates and usually earn more money in some month					
than others. In these situations, project the annual rate of	and Adults)." This number MUST be equal to the number of member must enter the last four digits of their				
income and report that. This includes workers with annual employment contracts but may choose to have salaries paid over	household members listed in STEP 1 and STEP 3 . If there are any members of your household that you have not listed on the apply for benefits even if you do not have a				
a shorter period of time; for example, school employees.	er members of your household that you have not listed on the apply for benefits even if you do not have a application, go back and add them. It is very important to list all SSN. If no adult household members have a				
a shorter period of time, for example, school employees.	household members, as the size of your household affects your SSN, leave this space blank and mark the box to				
	eligibility for free and reduc	the right labeled "Check if no SSN."			
STEP 4: CONTACT INFORMATION AND ADULT SIGNATURE					
An adult member of the household must sign the application. 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.					
· · ·	B) Print and sign your	C) Return completed form to:	D) Share children's racial and ethnic identities		
	name. Print the name of the	Anne Greif 900 Geiger St	(optional). On the back of the application, we ask		
	adult signing the application	Neenah, WI 54956	you to share information about your children's race		
	and that person signs in the	920-967-0107	and ethnicity. This field is optional and does not		
	box "Signature of adult."	Agreif@smcatholicschools.org	affect your children's eligibility for free or reduced		
both is optional, but helps us reach you quickly if we need			price school meals.		
to contact you.					