8/3/2020

Dear Parents,

Enclosed with this letter is a copy of the application for Free and Reduced Price School Meals.

We ask that every family complete and return the form regardless of whether or not you believe you will qualify for the program.

Completing the application and returning it helps our school district in two ways. First, completing the application ensures that any student that qualifies will get to participate in the free and reduced price meal program. We want to make sure that every student can receive a quality school lunch at the lowest cost possible.

Second, every student that qualifies for the program results in additional state money for our school district.

For simplicity, we’ve marked the sections of the form you should complete.

Step 1  List all household members who are infants, children, and students up to and including grade 12.

Step 2  List household members who participate in the following assistance programs: SNAP, TANF, or FDPIR.

Step 3  Report income for all household members.

Step 4  Complete the contact information and sign form.

If you are absolutely certain your child will not qualify, you may write “Do Not Qualify” in the area marked for income and return the form. If you have questions about the program, please refer to the list of frequently asked questions enclosed with this letter, or give us a call at (573) 237-3231.

We want every child to be able to receive a quality school lunch at the lowest possible cost. Thank you for helping us with that effort.

Sincerely,

Dr. Josh Hoener
Superintendent
New Haven Public Schools
LETTER TO PARENTS
FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED PRICE SCHOOL MEALS

Dear Parent/Guardian:

Children need healthy meals to learn. The New Haven School District offers healthy meals every school day. Breakfast costs $1.75 for PK-Grade 12, lunch costs $2.45 for Grade PK-6 and $2.55 for Grade 7-12. Your children may qualify for free meals or for reduced price meals. Reduced price is $0.30 for breakfast and $0.40 for lunch. 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 the Food Stamp Program/Supplemental Nutrition Assistance Program (SNAP), the Food Distribution Program on Indian Reservations (FDPIR) or Temporary Assistance/Temporary Assistance for Needy Families (TANF), are eligible for free meals.
   - Foster children who are 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’s 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.

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Annually</th>
<th>Monthly</th>
<th>Weekly</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$23,606</td>
<td>$1,968</td>
<td>$454</td>
</tr>
<tr>
<td>2</td>
<td>31,894</td>
<td>2,658</td>
<td>614</td>
</tr>
<tr>
<td>3</td>
<td>40,182</td>
<td>3,349</td>
<td>773</td>
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<tr>
<td>4</td>
<td>48,470</td>
<td>4,040</td>
<td>933</td>
</tr>
<tr>
<td>5</td>
<td>56,758</td>
<td>4,730</td>
<td>1,092</td>
</tr>
<tr>
<td>6</td>
<td>65,046</td>
<td>5,421</td>
<td>1,251</td>
</tr>
<tr>
<td>7</td>
<td>73,334</td>
<td>6,112</td>
<td>1,411</td>
</tr>
<tr>
<td>8</td>
<td>81,622</td>
<td>6,802</td>
<td>1,570</td>
</tr>
<tr>
<td>For each add’l person add</td>
<td>+ 8,288</td>
<td>+ 691</td>
<td>+ 160</td>
</tr>
</tbody>
</table>

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 prior 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 or e-mail Julie Conner, New Haven School District Homeless Liaison/Migrant Coordinator at (573) 237-2141 or jconner@newhavenschools.us.

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: Amy Schenck, Superintendent Secretary, 100 Park Drive, New Haven, MO 63068.

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 Amy Schenck at aschenck@newhavenschools.us or (573) 237-3231 immediately.

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 WIC. CAN MY CHILDREN GET FREE MEALS? Children in households participating in WIC 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 also 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. WHAT IF I DISAGREE WITH THE SCHOOL’S DECISION ABOUT MY APPLICATION? You should talk to school officials. You also may ask for a hearing by calling or writing to: Dr. Josh Hoener, Superintendent, New Haven School District, 100 Park Drive, New Haven, MO 63068. (573) 237-3231.

10. 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.

11. 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.

12. 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, those will also be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you meant to do so.

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, or receive Family Subsistence Supplemental Allowance payments, 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. Any additional combat pay resulting from deployment is also excluded from income.

14. 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.

15. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for the Food Stamp Program/SNAP or other assistance benefits, contact your local assistance office or call 1-855-373-4636.

If you have other questions or need help, call (573) 237-3231.

Sincerely,

[Signature]

Dr. Josh Hoener
Superintendent
New Haven School District

USDA Non-discrimination Statement:

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 reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) mail: U.S. Department of Agriculture
       Office of the Assistant Secretary for Civil Rights
       1400 Independence Avenue, SW
       Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.
Step 3: Report Income for All Household Members

1. **Income Source**: Include income from any source. Be sure to report income from the back side of the application if it determines if your household.

2. **How do I report my income?**
   - **No Income**: If you do not have any income, please check this box.
   - **Income Source**: List all income sources from all household members.
   - **Income Type**: SSI, SSDI, VA, etc.
   - **Amount**: Amount of income received.

3. **Step 2: Do Any Household Members Currently Participate in SNAP, TANF, or Other Programs?**

   - **Yes**: If any household member currently participates in SNAP or TANF, mark the appropriate box.
   - **No**: If no household member currently participates in SNAP or TANF, mark the appropriate box.

4. **Step 1: List All Household Members Who Meet the Criteria.**

   - **Children or Adults**: List all children and adults in your household.
   - **Address**: Include child’s name and address.

5. **Additional Information**: Include any additional information that may be relevant to your household.

How to Apply for Free and Reduced Price School Meals:

- Visit the New Haven School District website for more information.
- Contact the school district directly for assistance.
- Use the application to help you fill out the application and do your best to print clearly.
### Step 4: Contact Information and Adult Signature

To apply, provide the correct information for the household head and all adults in the household. Include your name, address, phone number, and signature on the application. The following information is required:

- **Name:**
- **Address:**
- **Phone Number:**
- **Signature:**

You must provide the following information for each adult member of the household:

- **Name:**
- **Address:**
- **Phone Number:**
- **Signature:**

### Reduced Price Meals

Reduced price meals are available to students who meet the eligibility requirements. To apply for reduced price meals, complete the application process. If you qualify, your child will receive reduced price meals.

### Report Total Household Size

The total number of household members is important for determining eligibility for reduced or free meals. Include all members of the household, including yourself, in the reporting process.

### Report Income

Income is reported in two ways:

- **Unearned Income:**
- **Earned Income:**

Reports must be submitted for all household members.

### Report Income Earned by Adults

#### What is Child Income?

Child income is considered income received by the child and includes any earned or unearned income.

#### 3.3 Report Income Earned by Children

- **Report all income received by children:**
- **Count foster children's income:**
- **Report the combined gross income for all children listed:**

Write "0" in any fields where there is no income to report. Any income received by a child must also be reported on the child's application.

### Additional Notes

- **Children and students who are not supported by your household:**
- **Income that is not considered income:**

Complete the application and submit it to the appropriate office.

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**Table:**

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Phone</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>John Doe</td>
<td>123 Main St.</td>
<td>555-1234</td>
<td>Signature 1</td>
</tr>
<tr>
<td>Jane Smith</td>
<td>456 Maple Ave.</td>
<td>555-5678</td>
<td>Signature 2</td>
</tr>
</tbody>
</table>

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**Notes:**

- **Reduced price meals:**
- **Report total household size:**
- **Report income:**
REQUEST FOR INFORMATION

(Complete one form per family)

Please answer the question below by checking the appropriate box. The following information is a request adopted by the General Assembly in 2010 requiring school districts to determine whether or not all children in a family have health insurance.

Does each child in your family have healthcare insurance?

☐ YES

☐ NO

MO HealthNet (Medicaid) is considered healthcare insurance.

If NO is checked the school district will provide the Does Your Child Need Healthcare Coverage form for the family.

Completion of this form is not a condition of determining meal eligibility. The Free and Reduced Price Meals Family Application will be reviewed regardless of your response to this Request for Information.

Submit this request with your Free and Reduced Price School Meals Family Application or return to your school/school district.

Printed name of parent/guardian: _________________________________________________________________

Mailing Address: ____________________________________________

City: ___________________________ State: __________ Zip Code: __________

The Department of Elementary and Secondary Education does not discriminate on the basis of race, color, religion, gender, national origin, age, or disability in its programs and activities. Inquiries related to Department programs and to the location of services, activities, and facilities that are accessible by persons with disabilities may be directed to the Jefferson State Office Building, Office of the General Counsel, Coordinator – Civil Rights Compliance (Title VI/Title IX/Section 504/ADA/AGE Act), 6th Floor, 201 Jefferson Street, P.O. Box 480, Jefferson City, MO 65102-0480, telephone number 573-526-4757 or TTY 800-735-2966; email civilrights@desa.mo.gov.