

Instructions for Completing the Free & Reduced Price School Meals Family Application

For households receiving benefits from the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) or the Food Distribution Program on Indian Reservations (FDPIR), follow these instructions:

- Part 1:** List each child's name, the school they attend and their grade.
Part 2: Enter household's Master Case Number if the household qualifies for SNAP, TANF or FDPIR.
Part 3: Skip this part.
Part 4: Complete this part. An adult must sign the form.
Part 5: This part is optional and does not affect your children's eligibility for free or reduced price meals. If you do not select race or ethnicity, one may be selected based on visual observation.

For households with FOSTER, HOMELESS, MIGRANT or RUNAWAY CHILDREN, follow these instructions:

If all children in the household are foster children:

- Part 1:** List all foster children, the school they attend and their grade. Check the box indicating the child is a foster child.
Part 2: Skip this part.
Part 3: Skip this part.
Part 4: Complete this part. An adult must sign the form.
Part 5: This part is optional and does not affect your children's eligibility for free or reduced price meals. If you do not select race or ethnicity, one may be selected based on visual observation.

If some of the children in the household are foster children or are homeless, migrant or runaway children:

- Part 1:** List all children, the school they attend and their grade. Check the appropriate box.
Part 2: If the household does not have a Master Case Number, skip this part.
Part 3: Follow these instructions to report total household income from last month.
Column 1 – Household Members: List the first and last name of **each** person living in your household, related or not (such as grandparents, other relatives or friends) who share income and expenses. Attach another sheet of paper if necessary.
Column 2 - Gross Income and How Often it was Received: Gross income is the amount earned **before taxes and other deductions**; it is not your take-home pay. For each household member, list each type of income received for the month. You must also report how often the money is received – weekly, every other week, twice a month, or monthly.

Earnings from Work includes the following:

- Salary, wages, cash bonuses
- Net income from self-employment (farm or business)

If you are in the U.S. Military, include:

- Basic pay and cash bonuses (do not include combat pay, Family Subsistence Supplemental Allowance (FSSA) payments or privatized housing allowances)
- Allowances for off-base housing, food and clothing

Do not include income from SNAP, FDPIR, WIC, Federal education benefits and foster care payments.

Public Assistance/Child Support/Alimony includes the following:

- Unemployment benefits, Worker's compensation
- Supplemental Security Income (SSI), Cash assistance from state or local government
- Veteran's benefits (VA benefits), Strike benefits
- Child support payments, Alimony payments

Pensions/Retirement/All Other Income includes the following:

- Social Security payments (including railroad retirement and black lung benefits)
- Private pensions or Disability benefits
- Regular income from trusts or estates, Annuities, Investment income, Earned interest, Rental income and *Regular* cash payments received from outside the household.

If you have no income, write "0" or leave the income field blank. By doing this, you are certifying there is no income to report.

Household Size: Enter the total number of people in your household.

Social Security Number: The adult signing the form must list the last four digits of their Social Security Number (SSN) or check the box to the right labeled “Check if no SSN.”

Part 4: Complete this part. An adult must sign the form.

Part 5: This part is optional and does not affect your children’s eligibility for free or reduced price meals. If you do not select race or ethnicity, one may be selected based on visual observation.

Please note: Children who meet the definition of homeless, migrant or runaway, are eligible for free meals. However, the school district must have documentation on file from a migrant coordinator, homeless/runaway liaison or the district’s Direct Certification list to approve the child for free meals.

For ALL other households, follow these instructions:

Part 1: List all children, the school they attend and their grade.

Part 2: If the household does not have a Master Case Number, skip this part.

Part 3: Follow these instructions to report total household income from last month.

Column 1 – Household Members: List the first and last name of **each** person living in your household, related or not (such as grandparents, other relatives or friends) who share income and expenses. Attach another sheet of paper if necessary.

Column 2 - Gross Income and How Often it was Received: Gross income is the amount earned **before taxes and other deductions**; it is not your take-home pay. For each household member, list each type of income received for the month. You must also report how often the money is received – weekly, every other week, twice a month, or monthly.

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Household Size: Enter the total number of people in your household.

Social Security Number: The adult signing the form must list the last four digits of their Social Security Number (SSN) or check the box to the right labeled “Check if no SSN.”

Part 4: Complete this part. An adult must sign the form.

Part 5: This part is optional and does not affect your children’s eligibility for free or reduced price meals. If you do not select race or ethnicity, one may be selected based on visual observation.