

Part 6 - Foster Children *In most cases foster children are eligible for free meals regardless of your household income*

Foster Home License Number: _____ (optional)

A. The welfare agency or court is legally responsible for the child and the foster home is, in fact, and extension of the welfare agency or court.

B. The child is a resident of a licensed "Group Foster" home or a residential institution.

Part 7 - Child's Racial/Ethnic Identity (optional)

Check one or more racial identities:

 American Indian or Alaskan Native Asian
 Black or African American White
 Native Hawaiian or Other Pacific Islander Other

Check one ethnic identity:

 Hispanic or Latino
 Neither Hispanic nor Latino
Privacy Act Information: Social Security Number

The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. You must include the social security number of the adult household member who signs the application. The social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program, Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.

Non-discrimination Statement: This explains what to do if you believe you have been treated unfairly.

"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. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (800) 795-3272 or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer."

Verification - This is for school use only

Date Selected for Verification: _____

Confirming Official's Signature: _____

Response Due from Household: _____

Date Follow-up/Second Notice: _____

Follow-up Official's Signature: _____

Sample Selection:
 Standard Basic
 Alternate-Random
 Alternate-Focused
FAP/FIP Eligibility:
 Not Confirmed
 Confirmed:
 Department of Human Services
 Notice of Eligibility
Income
 \$ _____ Wage Stubs
 Weekly Written Documents
 Every 2 Weeks Collateral Contact
 Twice a Month Agency Records
 Monthly Other _____
 Annual
Verification Result:
 Free to Reduced
 Free to Paid
 Reduced to Free
 Reduced to Paid
 No Change
Reason For Eligibility Change:
 Income
 Household Size
 Refused to Cooperate
 Other _____

Date Adverse Notice Sent: _____

Verification Official's Signature: _____

Approval/Disapproval - This is for school use only**Annual Income Conversion: Weekly x 52, Every 2 Weeks x 26, Twice a Month x 24, Monthly x 12**

Household Size: _____

Total Gross Income: \$ _____

 Weekly
 Every 2 Weeks
 Twice a Month
 Monthly
 Annual

 Foster Child
 Categorical Eligibility
Reason for Denial:
 Income too High
 Incomplete Application
 Other (specify) _____
Eligibility:
 Free
 Reduced
 Paid
 Temporary Free- Time Period: _____ (expires after _____ days)

Determining Official's Signature: _____

Date: _____

Date Dropped/Withdrawn: _____