

**LETTER TO HOUSEHOLDS
NATIONAL SCHOOL BREAKFAST AND LUNCH PROGRAM**

Dear Parent or Guardian:

The Harford County Public School System serves breakfast and lunch each school day. Children may buy lunch for \$1.70 in elementary schools and \$1.80 in secondary schools and breakfast for \$1.05. Children also may get breakfast & lunch meals free or at a reduced price. The reduced price is \$.40 for lunch and \$.20 for breakfast. All meals served must meet nutrition standards established by the U.S. Department of Agriculture. If a child has been determined by a doctor to have a disability that would prevent the child from eating the regular school meal, this school system will make substitutions prescribed by the doctor. If a substitution is needed, there will be no extra charge for the meal. If you believe your child needs substitutions because of a disability, please get in touch with us for further information.

Most children in your household receiving food stamps or TCA (Temporary Cash Assistance) and most foster children can obtain free meals. If your total household income is the same or less than the amounts on the income Chart below, your children can receive free meals or reduced price meals. Children in households participating in WIC may be eligible for free or reduced-price meals. Children certified as homeless, runaway, or migrant qualify for free meals. **TO OBTAIN FREE OR REDUCED PRICE MEALS FOR YOUR CHILDREN, YOU MUST COMPLETE THE APPLICATION FOR YOUR HOUSEHOLD AND RETURN IT TO THE SCHOOL. WE CANNOT APPROVE AN INCOMPLETE FORM. YOU AND THE CHILDREN IN YOUR HOUSEHOLD DO NOT HAVE TO BE U.S. CITIZENS TO QUALIFY FOR FREE OR REDUCED-PRICE MEALS.**

INCOME CHART

Effective from July 1, 2009 to June 30, 2010

| Household Size | Week | Annual | Month |
|---------------------------------|-------|--------|-------|
| 1 | 386 | 20,036 | 1,670 |
| 2 | 519 | 26,955 | 2,247 |
| 3 | 652 | 33,874 | 2,823 |
| 4 | 785 | 40,793 | 3,400 |
| 5 | 918 | 47,712 | 3,976 |
| 6 | 1,051 | 54,631 | 4,553 |
| 7 | 1,184 | 61,550 | 5,130 |
| 8 | 1,317 | 68,469 | 5,706 |
| For each additional member, add | +134 | +6,919 | +577 |

HOW TO APPLY

If your household now receives food stamps or TCA, the form must have the names of all household members, a food stamp or TCA case number for the children you are applying for and the signature of an adult household member. If you are applying for a foster child, the application must have the child's name, the child's "personal use" income, and an adult signature. If you do not list a food stamp or TCA case number for the children you are applying for, then the form must have the children's names, the names of all household members, the amount of income each person received last month, the signature of an adult household member and that adult's social security number or the word "none" if the adult does not have a social security number. An application that is not complete cannot be approved.

OTHER INFORMATION

VERIFICATION: Your eligibility may be checked by food service officials at any time during the school year. You may be asked to send information to prove that your child should receive free or reduced price meals.

FAIR HEARING: If you do not agree with the decision regarding your application or the results of verification, you may wish to discuss it with the Food & Nutrition Office. You also have the right to a fair hearing. You can do this by calling or writing to the following official:

Gary A. Childress
101 Industry Lane
Forest Hill, Maryland 21050
410-638-4078.

CONFIDENTIALITY: School officials use the information on the form to determine if your child should receive free or reduced price meals. Also, the name and eligibility status of your child may be:

- Given to local Title I officials for allocation and evaluation purposes.
- Used for National Assessment of Educational Progress analyses or other authorized purposes.
- Given to other Federal and State education or State health programs. No other use of this information is permitted.

REAPPLICATION: You may apply for meals at any time during the school year. If you are not eligible now but have a change, like a decrease in household income, an increase in household size, become unemployed, or receive food stamps or TCA for your child, complete a Meal Benefit Form.

In accordance with Federal law and U.S. Department of Agriculture (USDA) 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, DC 20250-9410 or call toll free (866) 632-9992 (voice). TDD users can contact USDA through local relay or the Federal Relay at (800) 877-8339 (TDD) or (866) 377-8642 (relay voice users). USDA is an equal opportunity provider and employer.

INSTRUCTIONS FOR COMPLETING THE MULTI-CHILD MEAL BENEFIT FORM

To apply for free and reduced price meals, complete **one form** using the instructions below. Sign the form and return it to the school. If you need help, please call Food & Nutrition at 410-638-4078.

PART 1 – STUDENT INFORMATION – ALL HOUSEHOLDS COMPLETE

- List the child(children's) name, school, grade, and Food Stamp or TCA number (if any).
- If there are students in your household without a TCA or Food Stamp number, complete Part 3.
- If a Food Stamp or TCA number is provided for all students in the household, skip to Part 4. A Social Security Number is not required.

PART 2 – COMPLETE ONLY IF APPLYING FOR A FOSTER CHILD.

- Check the box and list the personal use income, if any, for the student. "Personal Use" income is: (a) Money given by the Department of Social Services identified by category for the personal use of the student, such as for clothing, school fees, and allowances; and (b) All other money the student(s) receives, such as money from his/her family and money from the full-time or regular part-time jobs of the student(s).
- Skip Part 3. Do not list any other student(s), household members, or income.
- A foster parent or other official representing the student(s) must sign the application in Part 4. A Social Security Number is not necessary.

PART 3 – TOTAL HOUSEHOLD GROSS INCOME.

- List the first and last name of everyone in your household whether they receive income or not. Your household includes all those living as one economic unit. Include yourself, all children living with you, and any other person living in your household related or not (such as grandparents, other relatives, or friends). Do not list foster children; complete a separate application for each foster child as directed in Part 2. Attach another sheet of paper if necessary. Next to each person's name list each type of income received last month, and how often it was received. You must indicate how much (in dollars and cents), and how often received (weekly, every other week, twice a month, or monthly). **If a household member has no income-indicate this by checking the box in the last column.**
- Report all income as **gross income**, except as noted. Gross income is the amount earned before taxes and other deductions. This is not the same as take-home pay. For self-owned business, farm or rental income, report income as **net income**.
- If you are in the Military Housing Privatization Initiative, do not include your housing allowance as income.

INCOME TO REPORT

Earnings from Work
Wages/Salaries/Tips

Additional Income
Child Support
Alimony
TCA Payments
Pensions
Retirement
Social Security
Strike Benefits

All Other Income

Disability benefits
Cash withdrawn from savings
Interest/Dividends
Income from
Estates/Trusts/Investments
Regular contributions from persons not living in the household
Net royalties/annuities/net rental income
Unemployment Compensation
Workers' Compensation
Net income from self-owned business or farm
Supplemental Security Income

(SSI)

Veterans' Benefits (VA)

PART 4 - SIGNATURE AND SOCIAL SECURITY NUMBER: ALL HOUSEHOLDS COMPLETE PART 4.

- All forms must have the signature of an adult household member.
- The form must have the Social Security Number of the adult who signs unless the adult does not have a Social Security Number. Write "none" to show that the adult does not have a Social Security Number. A Social Security Number is not needed if you listed a Food Stamp or TCA number for each student or if you are applying for a foster child.

PART 5- RACIAL/ETHNIC IDENTITY:

You are not required to answer this question to get meal benefits. This information will help ensure that everyone is treated fairly.

Program documents are available in alternate formats upon request by calling Harford County Public Schools, Food & Nutrition, 410-638-4078. Maryland Relay Number (1-800-735-2258). We will let you know when your application has been approved or denied.

The Maryland State Department of Education does not discriminate on the basis of race, color, sex, age, national origin, religion, disability or sexual orientation in matters affecting employment or in providing access to programs. For inquiries related to Department policy, please contact: Equity Assurance and Compliance Branch, Office of the State Superintendent, Maryland State Department of Education, 200 W. Baltimore St., Baltimore, MD 21201-2595 – 410 767-0433 Voice – 410 767-0431 FAX – 410 333-6442 TTY/TDD