

## National School Lunch Program/School Breakfast Program – Elementary

Dear Parent/Guardian:

Children need healthy meals to learn. **The Diocese of Cleveland/Nutrition Services** offers healthy meals every school day. Breakfast costs **\$1.50**; lunch costs **\$2.75**. Your child(ren) may qualify for free or reduced-price meals. Reduced price is **\$.30** for breakfast and **\$.40** for lunch.

To apply for free or reduced-price meals, use the Free and Reduced-Price School Meals Family Application, which is enclosed. We cannot approve an application that is not complete, so be sure to fill out all required information. **Return the completed application to the school.** Below are some common questions and answers to help you with the application process.

**STOP! If you have received a NOTICE OF DIRECT CERTIFICATION for free meals, do not complete the application. But do let the school know if any children in your household are not listed on the Notice of Direct Certification letter you received.**

1. **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.
2. **Who can receive free or reduced-price meals?** All children in households receiving benefits through the Supplemental Nutrition Assistance Program (SNAP), or Ohio Works First (OWF) benefits can get free meals regardless of your income. Also, your children may receive free or reduced-price meals if your household's gross income is within the limits on the Federal Income Eligibility Guidelines.
3. **Can foster children get free meals?** Yes, foster children that are under the legal responsibility of a foster care agency or court, are eligible for free meals.
4. **How do I know if my children qualify as homeless, migrant, or runaway?** If members of your household lack a permanent address; are staying together in a shelter, hotel or other temporary housing arrangement; relocate on a seasonal basis or; children live with you who have chosen to leave their prior family or household then the children may qualify as homeless, migrant or runaway. If you have not been told your children will get free meals, please call **Diocese of Cleveland / Nutrition Services (216) 696-6525 Ext. 3120** to see if they qualify.
5. **Should I fill out an application if I received a letter THIS school year saying my children are approved already for free meals?** No, but please read the letter carefully and follow the instructions. Please call **Diocese of Cleveland/ Nutrition Services (216) 696-6525 Ext. 3120** if any children in your household were missing from the eligibility notification or if you have questions.
6. **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 are required to submit a new application unless the school told you that your child is eligible for the new school year. Otherwise your child will be charged the full price for meals.
7. **I get WIC benefits. Can my child(ren) get free meals?** Children in households participating in WIC may be eligible for free or reduced-price meals. Please complete and submit an application.
8. **Will the information I give be checked?** Yes, we may ask you to send written proof of the household income.
9. **If I don't qualify now, may I apply again 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 or reduced-price meals if the household income drops below the income limit.
10. **What if I disagree with the school's decision about my application?** You should talk to Nutrition Services' officials. You may also ask for a hearing by calling or writing to: **Ed Morel, Diocese of Cleveland/Nutrition Services, 1404 East Ninth Street, 2<sup>nd</sup> Floor, Cleveland, OH 44114-1722 (216) 696-6525 Ext. 3110.**
11. **May I apply if someone in my household is not a U.S. citizen?** Yes. You, your child(ren), or other household members do not have to be U. S. citizens to apply for free or reduced-price meals.
12. **Who should I include as members of my household?** You must include **all** people living in your household, related or not (such as grandparents, other relatives, or friends) who share income and expenses. You must include yourself and all children who live with you. If additional space is needed attach a separate list. If you live with other people who are economically independent (for example, people who you do not support, who do not share income with you or your children, and who pay a pro-rated share of expenses) do not include them.
13. **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 not if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
14. **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, 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.
15. **My family needs more help. Are there other programs we might apply for?** To find out how to apply for Ohio SNAP or other assistance benefits, contact your local assistance office or call 877-852-0010.

If you have other questions or need help, call **(216) 696-6525 Ext. 3120** or **(800) 869-6525 Ext. 3120** (in-state long distance).

Sincerely,  
 Nutrition Services

2019-2020

**Your children may qualify for free or reduced-price meals if your household income falls at or below the limits on this chart.**

<b>FEDERAL INCOME ELIGIBILITY GUIDELINES</b>			
<b>For School Year 2019-2020</b>			
Household size	Yearly	Monthly	Weekly
1	\$ 23,107	\$ 1,926	\$ 445
2	31,284	2,607	602
3	39,461	3,289	759
4	47,638	3,970	917
5	55,815	4,652	1,074
6	63,992	5,333	1,231
7	72,169	6,015	1,388
8	80,346	6,696	1,546
Each additional person:	+ 8,177	+ 682	+ 158

**Privacy Act Statement: This explains how we will use the information you give us.**

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 last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Ohio Works First (OWF) case number or other 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.

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: How to File a Complaint, 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](mailto:program.intake@usda.gov).

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