

# BEARDSLEY SCHOOL DISTRICT

## Letter to Households about the National School Breakfast & Lunch Program

2016-2017

Beardsley School District offers healthy and delicious meals each and every school day.

Our School District offers an on-line payment option called **REV-TRAK**. Please follow the link at [Beardsleyschool.org](http://Beardsleyschool.org) to make meal payments or check balances with no added fees. Your children's account will be updated regularly.

**Breakfast-** Served at **no charge** for all Beardsley students.

<b><u>Lunch-</u></b>	<b>\$ 1.80</b> for kindergarten thru sixth grade	<b>Bottled Water-</b> \$ .50
	<b>\$ 2.00</b> for junior high *includes salad bar	<b>Extra Milk-</b> \$ .50
	<b>\$ .40</b> for reduced price lunch	

**Your children may qualify for free or reduced priced Lunches.**

---

*Here are answers to questions you may have about applying:*

**1. WHO CAN RECEIVE FREE OR REDUCED-PRICE MEALS?**

- All children in households receiving benefits from CalFresh, CalWORKs or FDIPIR are eligible for free meals.
- Foster children under the legal responsibility of a foster care agency or court are eligible for free meals.
- Children who meet the definition of homeless, migrant, or runaway are eligible for free meals.
- Children may receive free or reduced-price meals if your household's income is within the limits of the Income Eligibility Guidelines. Your children may qualify for free or reduced-price meals if your household income falls at or below the limits on the below chart.

**2. HOW DO I KNOW IF MY CHILDREN QUALIFY AS HOMELESS, MIGRANT, AND 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 have not been told your children will qualify for free meals, please contact your school office for assistance.

**3. DO I NEED TO COMPLETE AN APPLICATION FOR EACH CHILD?**

- No. Use one Application for Free and Reduced-Price Meals for all children 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 your school's cafeteria.

**4. SHOULD I COMPLETE 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 received carefully and follow any instructions. If any children in your household were missing from your eligibility notification, please immediately contact the Nutrition Department at 661-392-8758

**5. MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT A NEW ONE?**

- Yes, if you want to participate in the meal program. 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 RECEIVE WOMEN, INFANTS AND CHILDREN (WIC) BENEFITS. CAN MY CHILDREN RECEIVE FREE MEALS?**

- Children in households participating in WIC *may* be eligible for free or reduced-price meals. Please complete an application and return it for processing.

**7. WILL THE INFORMATION I PROVIDE BE CHECKED?**

- School officials may check the information on the application at any time during the school year. You may be asked to send information to prove your income, or current eligibility for CalFresh, CalWORKS, FDPIR, or Kin-GAP.

**8. IF I DO NOT QUALIFY NOW, MAY I APPLY LATER?**

- Yes, you can apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may be eligible for free and reduced-price meals if the household income drops below the income limit.

**9. 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.

**10. WHAT IF MY INCOME IS NOT ALWAYS THE SAME?**

- List the amount that you normally receive. For example, if you normally make \$1,000 each month, but you missed some work last month and only made \$900, state on the application that you made \$1,000 per month. If you normally receive overtime, include it, but do not include it if you only occasionally work overtime. If you have lost your job or had your hours or wages reduced, use your current income.

**11. 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 check the NO INCOME box.

**12. 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.

**13. WHAT IF THERE IS NOT ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY?**

- List and attach any additional household members on a separate piece of paper or second application.

**14. WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION REGARDING MY APPLICATION?**

- You should talk to the school officials. You may also ask for a hearing by calling or writing to

**Paul Miller, Superintendent: 1001 Roberts Lane Bakersfield, CA 93308**

**If you have other questions or need help, call 392-8758.**

***Si necesita ayuda, por favor llame al teléfono: 392-8758.***

## INSTRUCTIONS FOR APPLYING

### SECTION A: LIST ALL HOUSEHOLD MEMBERS WHO ARE INFANTS, CHILDREN, AND STUDENTS UP TO AND INCLUDING GRADE 12 AND THE NAME OF ANY SCHOOL THEY ATTEND OR N/A

- If your household receives CalFresh, CalWORKS, Kin-GAP or FDPIR, follow these instructions: Attach another sheet of paper if you need to.
- List each child's name and school; check appropriate benefit box and you must give an acceptable case number.
- Skip SECTION B only if you provided a case number.
- Complete SECTION C, a Social Security Number is not necessary.
- Do you have any foster children? If any children listed are foster children, check the "Foster Child" box next to the child's name and give their income. Foster children who live with you may count as members of your household and should be listed on your application. If you are only applying for foster children, complete Section A and then skip to Section C.

### SECTION B: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

- List the first and last name of every adult person living in your household, related or not. You must include yourself and any children with income. Attach another sheet of paper if you need to. Mark "X" if no income.
- Last month's income: List the types of income your household received last month. *Employment income*: List the gross income each person earned last month, or each person's normal monthly income. It is not the same as take home pay. Gross income is the amount earned *before* taxes and deductions. It should be listed on your pay stub, or your employer can tell you.
- Do not include people who live with you, but are not supported by your household's income and do not contribute income to your household and children or students already listed in Section A who do not earn income.
- *Other Income*: List the monthly total amount each person received last month from all other sources. Include child support, alimony, pensions, retirement, Social Security, Worker's Compensation, unemployment, strike benefits, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), disability benefits, regular contributions from people who do not live in your household, and ANY OTHER INCOME. Report net income for self-owned business, farm, or rental income.

### SECTION C: CONTACT INFORMATION AND ADULT SIGNATURE

- Complete all fields, an adult household member *must sign the form and list his or her last four digits of their Social Security Number, or check the box if he or she does not have one.*
- Report total household size if there is no benefit case number in Section A.
- Enter the total number of household members in the field "Total Household Members." This number **MUST** be equal to the number of household members listed in Section A and Section B. If there are any members of your household that you have not listed on the application, go back and add them. It is very important to list all household members, as the size of your household determines your income cutoff for free and reduced-price meals.

## 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 submit all needed information, 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 social security number is not required when you apply on behalf of a foster child or you list a CalFresh, California Work Opportunity and Responsibility to Kids (CalWORKs), 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.

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](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

(3) Email: [program.intake@usda.gov](mailto:program.intake@usda.gov)

This institution is an equal opportunity provider.

## INCOME ELIGIBILITY GUIDELINES

July 1, 2016–June 30, 2017

Household Size	Year	Month	Twice Per Month	Every Two Weeks	Week
1	\$ 21,978	\$ 1,832	\$ 916	\$ 846	\$ 423
2	29,637	2,470	1,235	1,140	570
3	37,296	3,108	1,554	1,435	718
4	44,955	3,747	1,874	1,730	865
5	52,614	4,385	2,193	2,024	1,012
6	60,273	5,023	2,512	2,319	1,160
7	67,951	5,663	2,832	2,614	1,307
8	75,647	6,304	3,152	2,910	1,455
For each additional family member, add:					
	\$ 7,696	\$ 642	\$ 321	\$ 296	\$ 148