

Maine Township High School District 207
2023-24 FREE/REDUCED PRICE MEALS & FEE WAIVER
APPLICATION INSTRUCTIONS

To apply for free and reduced-price meal services and/or fee waiver, complete the application using these instructions. Sign the application and return to the school.

1. APPLICANT INFORMATION *All Households Complete Section (1).*

- A. Print the name or names of the child(ren) you are applying for.
- B. List each child's student ID number.
- C. TANF case number-if applicable. List a current TANF case number or SNAP number for each child. Attach a copy of TANF/SNAP card(s) to application. *Link card number cannot be used. Skip to (6).* **Please note that the State of Illinois no longer allows the District access to the Direct Certification System and all families on SNAP must complete the application to be eligible.**
- D. Check if the application is for a foster child. Attach a copy of the front and back of child's medical card.
Skip to (5).

2. HOMELESS, MIGRANT, RUNAWAY OR HEAD START *(Categorically eligible)*

- A. Check box (if applicable) of student on application.
- B. Get corresponding signature. Go on to Section (5).

3. TOTAL HOUSEHOLD INCOME

- A. Write the names of everyone in your household, whether they receive income or not. Include yourself, the children you are applying for, all other children, your spouse, grandparents, and other related and unrelated people in your household. Use another piece of paper if you need more space. Check the box at right if the member does not have any income.
- B. Fill in each person's total income and attach a copy of the most recent (2022) tax return - IRS Form 1040 and all W-2's/ 1099's for each household member where applicable. If there is no tax return, but the household member is employed, please state reason for no tax return. **Your application may be denied if you do not provide a copy of the 2022 tax return and all W-2's/1099's for each employed household member.**
- C. You must complete a **4506-T Request for Transcript of Tax Return Form** for each working household member that cannot provide a tax return. (1) Fill out the Student ID line at the top of the page. (2) Complete all items in Sections 1 through 4 as applicable. (3) Sign on the first signature line (only one signature is required); (4) date, (5) phone number.

4. CHILDREN'S RACIAL AND ETHNIC IDENTITIES

Answer these questions if you choose to.

5. SIGNATURE AND SOCIAL SECURITY NUMBER *All Households Complete This Part.*

- A. All applications must have the signature of an adult household member.
- B. The adult signing the form must also list the last four numbers of his/her social security number.

C. If the adult does not have a social security number, mark the box indicating "I do not have a Social Security number."

D. A social security number is not required if you are applying with a SNAP or TANF case number or if you are applying for a foster child.

E. If there is no social security number and the box indicating such is not checked; the application will be denied.

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 on a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), 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 Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339, or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer

1. **DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD?** No. Use one Application for all students in your household per district. 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.
2. **MY CHILD'S APPLICATION WAS APPROVED LAST YEAR, DO I NEED TO FILL OUT ANOTHER ONE?** Yes, Your child's application is only good for that school year. You must send in a new application even if you are receiving assistances from SNAP or TANF.
3. **I GET WIC. CAN MY CHILD(REN) GET FREE MEALS?** Children in households participating in WIC **MAY** be eligible for free or reduced meals and a fee waiver. Please complete the application.
4. **MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN?** Yes. You or your child(ren) do not have to be a U.S. citizens to qualify for free or reduced priced meals and a fee waiver.
5. **MY FAMILY NEEDS MORE HELP, ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR?** To find out how to apply for SNAP, TANF or other assistance benefits, contact your local Department of Human Services office or call (800) 843-6154 (voice) or (800) 447-6404 (TTY).

Maine Township High School District 207

2023-24 FREE/REDUCED PRICE MEALS AND FEE WAIVER APPLICATION

(1) APPLICANT INFORMATION

Names of All Children in School <i>First - Middle - Last</i>	Student ID#	Food Stamp or TANF Case Number (if any, per child). If you list a SNAP or TANF Case Number, you must attach a current copy of IDHS Benefits Eligibility Letter with Case Number included, then Skip to (6)	Check if Foster Child*

** You must attach a copy of the front & back of the foster child's medical card.*

(2) HOMELESS, MIGRANT, RUNAWAY or HEAD START (Categorically eligible)

Homeless _____ Migrant _____ Runaway _____ Head Start _____

Signature of Your School Homeless Liaison, Migrant Coordinator or Head Start Director Date

(3) TOTAL HOUSEHOLD GROSS INCOME - before deductions You must tell us how much and how often.

NAME (List everyone in household)	Social Security Number (enter last 4 numbers)	Date of Birth	Total Income from IRS 2022 Form 1040	Check If <u>NO</u> income
	X X X - X X -		\$	
	X X X - X X -		\$	
	X X X - X X -		\$	
	X X X - X X -		\$	
	X X X - X X -		\$	
	X X X - X X -		\$	

_____ Attached is a copy of the 2022 IRS Form 1040, all W-2's, and/or 1099's for **each working household member.**

_____ I did not file IRS Form 1040 because _____

(4) CHILDREN'S RACIAL AND ETHNIC IDENTITIES (Optional)

Mark one ethnic identity: Mark one or more racial identities:

_____ Hispanic/Latino _____ Asian _____ Black or African American _____ Not Hispanic/Latino _____ White
 _____ American Indian or Alaska Native _____ Native Hawaiian or Other Pacific Islander

(5) SIGNATURE AND SOCIAL SECURITY NUMBER (Adult must sign)

An adult household member must sign the application. The adult signing the form must also list his/her social security number or mark the "I do not have a social security number" box.

Social Security Number: X X X - X X - _____ I do not have a social security number.

I certify (promise) that all the information on this application is true and that **all household income is reported.** I understand that the school officials may verify (check) the information. I understand that if I purposely give false information, my children may lose benefits, and I may be prosecuted.

_____/_____/_____
Date Printed Name of Adult Household Member Signature of Adult Household Member

Address of Adult Household Member City Zip Code

Maine Township High School District 207
FREE/REDUCED PRICE MEALS AND FEE WAIVER
2023-24 Income Eligibility Guidelines

Income Eligibility Guidelines Effective from July 1, 2023, to June 30, 2024											
Household Size	Free Meals 130% Federal Poverty Guideline					Household Size	Reduced-Price Meals 185% Federal Poverty Guideline				
	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly		Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	18,954	1,580	790	729	365	1	26,973	2,248	1,124	1,038	519
2	25,636	2,137	1,069	986	493	2	36,482	3,041	1,521	1,404	702
3	32,318	2,694	1,347	1,243	622	3	45,991	3,833	1,917	1,769	885
4	39,000	3,250	1,625	1,500	750	4	55,500	4,625	2,313	2,135	1,068
5	45,682	3,807	1,904	1,757	879	5	65,009	5,418	2,709	2,501	1,251
6	52,364	4,364	2,182	2,014	1,007	6	74,518	6,210	3,105	2,867	1,434
7	59,046	4,921	2,461	2,271	1,136	7	84,027	7,003	3,502	3,232	1,616
8	65,728	5,478	2,739	2,528	1,264	8	93,536	7,795	3,898	3,598	1,799
For each additional family member, add	6,682	557	279	257	129	For each additional family member, add	9,509	793	397	366	183

The following is the definition of income: **Income is defined as any monies earned before any deductions such as income taxes, social security taxes, insurance premiums, charitable contributions and bonds. It includes the following:**

- Monetary compensation for services includes wages, salary commissions, or fees;
- Net income from non-farm self-employment;
- Net income from farm self-employment;
- Social security;
- Dividends or interest on savings or bonds or income from estates or trusts;
- Net rental income;
- Public assistance or welfare payments;
- Unemployment compensation;
- Government civilian employee or military retirement or pensions or veteran payments;
- Private pensions or annuities;
- Alimony or child support payments;
- Regular contributions from persons not living in the household;
- Net royalties;
- Other cash income – Other cash income would include cash amounts received or withdrawn from any source including savings, investments, trust accounts, and other resources which would be available to pay the price of a child’s meal.