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WELDON VALLEY SCHOOL DISTRICT RE-20J

911 North Avenue Weldona, CO 80653 | tel. (970) 645-2411 | fax (970) 645-2377 Superintendent: Ben Bauman | Dean of Student's: Greg Edson

Weldon Valley School District Free and Reduced- Price School Meals School Year 2021-2022

Dear Weldon Valley School Families,

Please read over the information and the application listed on the following pages. You can print off the application and bring it into the school, send it by e-mail, or come pick up a hard copy in the front office. Please note that this year all students fall under the same rules as last year and school meals are available for all students from free.

Krista M. Dunn Weldon Valley School Business Manager 911 North Ave Weldona, CO 80653

Weldon Valley School District

Information about Applying for Free or Reduced-Price School Meals

Dear Parent/Guardian:

Children need healthy meals to learn. Weldon Valley School offers healthy meals every school day. This Year, Breakfast and Lunch will be free to all students. Your children may qualify for free or reduced-price school meals which can lead to PEBT money and other resources. Students in all grades that qualify for free or reduced-price meals will receive breakfast and lunch at no charge.

Below are common questions and answers to help you with the application process.

- WHO CAN RECEIVE FREE OR REDUCED-PRICE MEALS?
 - All children in households receiving benefits from the Supplemental Nutrition Assistance Program (SNAP), the Food
 Distribution Program on Indian Reservations (FDPIR) or Temporary Assistance for Needy Family (TANF/Colorado Works –
 Basic Cash Assistance or State Diversion), are eligible for free meals.
 - b. Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals. Foster children may be added as a household member of the foster family if the foster family chooses to apply. Including foster children as household members may help other children qualify for benefits. If the foster family is not eligible, it does not prevent a foster child from receiving benefits.
 - Children who qualify for their districts Head Start program are eligible for free meals.
 - d. Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
 - e. Children may receive free or reduced-price meals if your household's income is within the limits on the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced-price meals if your household income falls at or below the limits on this chart.

Household size	Yearly	Monthly	Weekly
1	\$23,828	\$1,986	\$459
2	\$32,227	\$2,686	\$620
3	\$40,626	\$3,386	\$782
4	\$49,025	\$4,086	\$943
5	\$57,424	\$4,786	\$1,105
6	\$65,823	\$5,486	\$1,266
7	\$74,222	\$6,186	\$1,428
8	\$82,621	\$6,886	\$1,589
ach additional person:	\$8,399	\$700	\$162

- 2. HOW DO I KNOW IF MY CHILDREN QUALIFY AS HOMELESS, MIGRANT, OR 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 already been notified that your children will receive free meals, please call or e-mail Krista Dunn -970-645-2411, or kdunn@weldonvalley.org
- 3. 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. We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to: Krista Dunn -970-645-2411, or kdunn@weldonvalley.org
- 4. SHOULD I FILL OUT 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 the instructions. If any children in your household are missing from your eligibility notification, contact Krista Dunn -970-645-2411, or kdunn@weldonvalley.org immediately.

- 5. MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT A NEW ONE? Yes. Your child's application is only valid for that school year and for the first 30 days of this school year. You must send in a new application unless the school notified you that your child is eligible for the new school year.
- 6. I RECEIVE WIC. CAN MY CHILDREN RECEIVE FREE MEALS? Children in households participating in WIC <u>may</u> be eligible for free or reduced-price meals. Please send in a completed free and reduced-price school meal application.
- 7. WILL THE INFORMATION I GIVE BE CHECKED? You may be selected to provide written proof of the household income you report on the application.
- 8. IF I DON'T QUALIFY NOW, MAY I APPLY 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 and reduced-price meals if the household income drops below the income limit.
- 9. WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION? You should talk to school officials. You also may ask for a hearing by calling or writing to **Krista Dunn -970-645-2411**, or **kdunn@weldonvalley.org**
- 10. 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. Immigration, migrant, citizenship or refugee status is not required to be provided during the application process, and families should continue to apply for free or reduced-price school meals. The application does require the last four numbers of a Social Security number or an indication that there is no Social Security number. Social Security number information is not reported to any organization outside of **Weldon Valley School District.**
- 11. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you <u>normally</u> 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 do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income. The last four digits of the Social Security Number of an adult household member (or an indication of "none") is required to process a complete income application.
- 12. 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 write a 0 in the field. However, if any income fields are left empty or blank, those will also be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you meant to do so. The last four digits of the Social Security Number of an adult household member (or an indication of "none") is required to process a complete income application.
- 13. 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.
- 14. WHAT IF THERE ISN'T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY? List any additional household members on a separate piece of paper, and attach it to your application. Contact **Krista Dunn -970-645-2411**, or kdunn@weldonvalley.org to receive a second application.
- 15. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for other assistance benefits, contact your local assistance office. Colorado PEAK is an online service to screen and apply for medical, food and cash assistance programs. It can be accessed at http://coloradopeak.force.com/.

If you have other questions or need help, contact Krista Dunn -970-645-2411, or kdunn@weldonvalley.org Sincerely,

Non-discrimination Statement:

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 <u>USDA Program Discrimination Complaint Form</u>, (AD-3027) found online at: 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; or

(3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

Determining Official Signature: □Categorical Eligibility - □SNAP □FDPIR □TANF □Foster □Homeless/Migrant/Runaway/Head Start Application Type: Total Household Income: \$_ Household Income Frequency - ☐ Weekly ☐ Bi-Weekly ☐ 2x/Month ☐ Monthly ☐ Annually optional and does not affect your children's eligibility for free or reduced price meals We are required to ask for information about your children's race and ethnicity. This information is important and helps to make sure we are fully serving our community. Responding to this section is Race (check one or more): American Indian or Alaskan Native You may also qualify for the Supplemental Nutrition Assistance Program! See more information below. HUNGER ¿NO LE ALCANZA EL DINERO PARA COMPRAR COMIDA? Get information on child and senior nutrition programs Linea Directa de Recursos de Comidas Derivaciones a bancos de comida y comidas gratis Referrals to food pantries and free meals Receive one-on-one assistance with applying for food stamps Obtenga información sobre programas de nutrición TOOO NEED HELP BUYING GROCERIES? LIAMENOS ODE Reciba ayuda personalizada para solicitar las estampillas de comida para niños y ancianos HungerFreeColorado.org ESTATAL 855-855-4626 Resource Hotine STATEWIDE, TOLL-FREE Hispanic or Latino 720-382-2920 METRO 720-382-2920 855-855-4626 Annual Income Conversion: Weekly x 52; Bi-Weekly x 26; 2 Times per Month x 24; Monthly x 12 Not Hispanic or Latino Household Size DISTRICT USE ONLY. DO NOT WRITE BELOW THIS LINE Asian Approval/Denial Date: Black or African American enforcement of the lunch and breakfast programs. We may share your eligibility your child is eligible for free or reduced price meals, and for administration and not have a social security number. We will use your information to determine if or when you indicate that the adult household member signing the application does law enforcement officials to help them look into violations of program rules. fund, or determine benefits for their programs, auditors for program reviews, and information with education, health, and nutrition programs to help them evaluate, child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary all needed information, we cannot approve your child for free or reduced price Indian Reservations (FDPIR) case number or other FDPIR identifier for your child Assistance for Needy Families (TANF) Program or Food Distribution Program on The social security number is not required when you apply on behalf of a foster primary wage earner or other adult household member who signs the application. meals. You must include the last four digits of the social security number of the this application. You do not have to give the information, but if you do not submit The Richard B. Russell National School Lunch Act requires the information on COLORADO Denied - □Over Income Guidelines □Incomplete/Missing: Notes: Application Status: Approved - OFree Visit coloradopeak.force.com to learn more. programs screen and apply for medical, food and cash assistance Colorado PEAK is an online service for Coloradans to Native Hawaiian or Other Pacific Islander □Reduced Notification Sent: White

OPTIONAL Children's Racial and Ethnic Identities

"I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and that school officials may verify (check) the information. I am aware that TOTAL GROSS INCOME (BEFORE TAXES AND OTHER DEDUCTIONS) for each source in whole dollars only. If they do not receive income from any source, write '0'. If you enter '0' or leave Annually Runaway Homeless Migrant STEP 2 If any household members (including you) currently receive assistance from any of the following programs: SNAP, TANF or FDPIR list the case number below. FDPIR Case Number In the spaces below list all other household members not listed in Step 1 (including yourself) even if they do not receive income. For each household member listed, if they do receive income, report Bi-Weekly 2x Month Monthly Today's Date Check box if no SSN List ALL Students' artending [Weldon Valley School District] (if more spaces are required for additional names, attach another sheet of paper) STEP 4 Contact information and adult signature. Mail signed and completed application to: [Weldon Valley School/911 North Ave, Weldona, CO 80653] Start Head Email Address Foster Pensions/Retirement/ All Other Income apply. Read How to Apply Price School Meals for Check all that for Free and nformation Reduced-TANF Case Number 69 69 69 Printed First and Last Name of Signer Grade Weekly Bi-Weekly 2x Month Monthly Annually Annually Weldon Valley School] 2021-2022 Household Application for Free and Reduced-Price School Meals Y Weekly Bi-Weeldy 2x Month Monthly 0 How Often? Birth Date How Often? XX-XXX C C 0 0 STEP 3 Report income for ALL household members (skip this step if you provided a case number in STEP 2) Zip Code SNAP Case Number Σ Last four digits of Social Security Number (SSN) or mark "no Σ Student Income Child Support/Alimony SSN" of adult signing this form only if Step 3B has been completed. Public Assistance/ 00 State 69 Student's Last Name Annually Complete one application per household. Please use a black or blue pen (not a pencil) Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families Bi-Weekly 2x Month Monthly TANF/Colorado Works - Basic Cash Assistance or State Diversion), or Food Distribution SIGNATURE of Adult Household Member (Required) Please include the TOTAL income, if any, received by all students listed above. How Often? Program on Indian Reservations (FDPIR). Provide case number and skip to Step 4. 0 City Weekly any fields blank, you are certifying that there is no income to report. Earnings from Work All Other Household Members (including yourself) M Apt. # or Lot # 69 69 69 STEP 5 Release of Information Names of All Other Household Members (Students' and Adults from Steps 1 and 3) Student's First Name Total Household Members Home or Cell Phone Number Student Income Mailing Address or PO Box STOP

The information provided on this application will be used in conjunction with state educational programs and may be shared with Medicaid or State Children's Health Insurance Program (SCHIP) offices. If your students are eligible to receive free or reduced-price meals this information may be shared with the school/district for purposes of waiving school/district program fees that your child(ren) might otherwise be required to pay. The school/district is not permitted to share your information with anyone else. You are not required to consent to the release of your information; this will not affect your student(s) eligibility for school meals. Your information WILL be shared unless you check one of the boxes below. Advanced Placement Medicaid/SCHIP Do NOT share my information Do NOT share my information

Accelerate College Opportunity Exam

> (AP) Exam and/or AP) Book Fees

with the programs I have

with any programs

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