

SHARING INFORMATION WITH OTHER PROGRAMS

Dear Parent/Guardian:

To save you time and effort, the information you gave on your Free and Reduced Price School Meals Application may be shared with other programs for which your children may qualify. **For the following programs, we must have your permission to share your information. Sending in this form will not change whether your children get free or reduced price meals.**

☐ No! I **DO NOT** want information from my Free and Reduced Price School Meals Application shared with any of these programs.

☐ Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **High School Instructional Class Fees i.e. "any materials needed to participate fully in a course of instruction."**

☐ Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **High School ACT / SAT / PSAT / AP EXAM Fees.**

☐ Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **Band Program- Instrument Rental and/or Middle School Band Book Fees.**

If you checked yes to any or all of the boxes above, fill out the form below. Your information will be shared only with the programs you checked.

Child's Name: _____ School: _____

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Child's Name: _____ School: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Address: _____

For more information, you may call **Tracy Knauer** at **330.527.4336**.
Return this form to: 10235 State Route 88 Garrettsville, OH 44231 by November 3, 2023.