

Free and Reduced Price Meal Benefits Application Packet



2023-2024

**Please complete the last form in this packet and return to
any Shelby County School or mail to:**

**Shelby County Schools
Child Nutrition Program
P. O. Box 1910
Columbiana AL 35051**

OR

**Apply online at:
www.myschoolapps.com**



**Scan QR Code
with your Phone
Camera to Apply
Online**

SHELBY COUNTY BOARD OF EDUCATION
Child Nutrition Programs
410 East College Street, P O Box 1910
Columbiana, AL 35051
<https://www.shelbyed.k12.al.us>
205-682-7000

FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED PRICE SCHOOL MEALS

Dear Parent/Guardian:

Children need healthy meals to learn. Shelby County Schools offers healthy meals every school day. Breakfast costs \$1.75 elementary/\$1.75 middle & high; lunch costs \$2.50 elementary/ \$2.75 middle & high. Your children may qualify for free meals or for reduced price meals. Reduced price is \$ 0.30 for breakfast and \$ 0.40 for lunch. This packet includes an application for free or reduced price meal benefits, and a set of detailed instructions. Below are some common questions and answers to help you with the application process.

1. WHO CAN GET FREE OR REDUCED PRICE MEALS?

- All children in households receiving benefits from **Alabama SNAP**, the **Food Distribution Program on Indian Reservations (FDPIR)**, **Alabama TANF**, or **Alabama Medicaid Free** are eligible for free meals.
- **Alabama Medicaid Reduced** are eligible for reduced priced meals.
- Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals.
- Children participating in their school’s Head Start program are eligible for free meals.
- Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
- 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.

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 haven’t been told your children will get free meals, please call the school, homeless liaison or migrant coordinator at (205)-682-7000.

| FEDERAL ELIGIBILITY INCOME CHART SY 23-24 | | | |
|--|--------|---------|--------|
| Household size | Yearly | Monthly | Weekly |
| 1 | 26,973 | 2,248 | 519 |
| 2 | 36,482 | 3,041 | 702 |
| 3 | 45,991 | 3,833 | 885 |
| 4 | 55,500 | 4,625 | 1068 |
| 5 | 65,009 | 5,418 | 1,251 |
| 6 | 74,518 | 6,210 | 1,434 |
| 7 | 84,027 | 7,003 | 1,616 |
| 8 | 93,536 | 7,795 | 1,799 |
| Each additional | 9,509 | 793 | 183 |

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: Any Shelby County School or Child Nutrition Program, P. O. Box 1910, Columbiana AL 35051, or APPLY ONLINE: MYSCHOOLAPPS.COM

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 got carefully and follow the instructions. If any children in your household were missing from your eligibility notification, contact CNP at Child Nutrition Program, P. O. Box 1910, Columbiana AL 35051 or at (205) 682-7000 or email Child Nutrition-Benefits Processor immediately.

5. CAN I APPLY ONLINE? Yes! You are encouraged to complete an online application instead of a paper application if you are able, if you are not able to do it online, paper applications can be found at every local school. The online application has the same requirements and will ask you for the same information as the paper application. Visit **WWW.MYSCHOOLAPPS.COM** to begin or to learn more about the online application process. Contact CNP, Child Nutrition Program, P. O. Box 1910, Columbiana AL 35051 or at (205) 682-7000 or email Child Nutrition-Benefits Processor if you have any questions about the online application.

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, through **September 21,2023**. You must send in a new application unless the school told you that your child is eligible for the new school year. If you do not send in a new application that is approved by the school or you have not been notified that your child is eligible for free meals, your child will be charged the full price for meals.

7. I GET WIC. CAN MY CHILDREN GET FREE MEALS? Children in households participating in WIC may be eligible for free or reduced price meals. Please send in an application.

8. **WILL THE INFORMATION I GIVE BE CHECKED?** Yes. We may also ask you to send written proof of the household income you report.
9. **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.
10. **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: **Asst. Superintendent, P. O. Box 1910, Columbiana AL 35051 Phone (205)682-7000.**
11. **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.
12. **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 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.
13. **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.
14. **DO I HAVE TO PROVIDE MY SOCIAL SECURITY NUMBER?** Only the last 4 digits of the social security number of the household's primary wage earner or another adult household member (or an indication of "none") is required.
15. **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.
16. **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 CNP at **Child Nutrition Program, P. O. Box 1910, Columbiana AL 35051 or (205) 682-7000 or email Child Nutrition-Benefits Processor** to receive a second application.
17. **MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR?** To find out how to apply for **Alabama SNAP** or other assistance benefits, contact your local assistance office or call **1-800-382-0499.**

If you have other questions or need help, call (205) 682-7000

**Nathan Hayes, Coordinator
Child Nutrition Program**

CHARGED MEAL POLICY

The goal of the Shelby County School District's Child Nutrition Program is to provide all students access to nutritious meals each school day, while also complying with all federal and state regulations. School districts participating in the National School Lunch Program must have a written Charged Meal Policy in place, developed with the input of stakeholder groups (i.e., parents, teachers, school administrators, etc.). This policy will be shared annually with appropriate school staff and communicated to parents/guardians during student enrollment, as part of the Meal Benefit Application, and will be available on our website.

In general, the student's parent/guardian is responsible for providing the funds to pay for school meals. However, if the necessary funds are not available on a given school day, the student will not be denied a reimbursable meal (this excludes adult and non-student meals which are not allowed to be charged). Extra food items that are not part of a meal, such as extra entrees, snacks, or ice cream, should not be charged. A record of unpaid meal charges must be maintained in accordance with USDA record retention requirements. The student's parent/guardian must pay delinquent debt accrued by unpaid meal charges by the end of each school year. At the end of each school year, delinquent debt will be reclassified as bad debt. Bad debt must be restored using non-federal funds. It is unlawful for a school's Child Nutrition Program to absorb bad debt from unpaid, charged meals.

Throughout the school year, as a student's unpaid meal charges accumulate (in excess of \$10.00), a board of education employee will follow the formal process of contacting a student's parent/guardian to obtain the needed funds for charged meals, and/or request that the parent/guardian complete the meal benefit application. When a student's outstanding balance exceeds \$25.00, an alternative reimbursable meal may be provided. If the student is without money for meals on a consistent basis, the administration should investigate the situation more closely and take further action if necessary. If financial hardship exists, households will be encouraged to apply for meal benefits. All monies collected from outstanding debts will be applied toward negative balances.

If parents/guardians are in need of financial assistance to pay for school meals, they are encouraged to apply for free and reduced price meals by completing the meal benefit application. Meal benefit applications are available at the student's school, the Central Office, and/or online at <http://www.myschoolapps.com>. The meal benefit application for free and reduced price meals takes just minutes to complete and may be completed at any time during the school year. A student's meal status is confidential.

Parents/guardians are encouraged to take advantage of the www.myschoolbucks.com online pre-payment system, thus eliminating situations that could develop during meal time because of a student's failure to bring meal money to school. Through this secure website/mobile app parents/guardians can view meal account balances, purchases, make payments, and receive low balance notification. There is no cost to register, check balances, and/or view the student's purchases. A small service fee will be charged by <http://www.myschoolbucks.com> if money is deposited into the student's account.

3.12.1 Charged Meal Policy (Adopted 11/17/22)

The contact information below is solely to file a complaint of discrimination.-Do not mail applications to this address, only complaints of discrimination.

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 primary wage earner or other 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 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. In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity* and sexual orientation*), disability, age, or reprisal or retaliation for prior civil rights activity. Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR-P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

- mail:**
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil
Rights 1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or
- fax:**
(833) 256-1665 or (202) 690-7442; or
- email:**
program.intake@usda.gov

This institution is an equal opportunity provider.

*The enclosed "nondiscrimination" language herein was added pursuant to the May 5, 2022, USDA memorandum. However, although included as currently required for audit compliance by the USDA, the State of Alabama objects to its inclusion, applicability, and the application of this language due to currently pending legal challenges in the matter of The State of Tennessee, et al. v. USDA, et al., Case No. 3:22-cv-00257, and may be subject to change or removal.

HOW TO APPLY FOR FREE AND REDUCED PRICE SCHOOL MEALS (DIRECTIONS)

Please use these instructions to help you fill out the application for free or reduced price school meals.

You only need to submit one application per household, even if your children attend more than one school in the Shelby County School System. The application must be filled out completely to certify your children for free or reduced price school meals. Please follow these instructions in order! Each step of the instructions is the same as the steps on your application. If at any time you are not sure what to do next, please contact CNP at the Child Nutrition office at (205) 682-7000 or email Child Nutrition-Benefits Processor.

PLEASE USE A PEN (NOT A PENCIL) WHEN FILLING OUT THE APPLICATION AND DO YOUR BEST TO PRINT CLEARLY.

STEP 1: LIST ALL HOUSEHOLD MEMBERS WHO ARE INFANTS, CHILDREN, AND STUDENTS UP TO AND INCLUDING GRADE 12

Tell us how many infants, children, and school students live in your household. They do NOT have to be related to you to be a part of your household.

Who should I list here? When filling out this section, please include ALL members in your household who are:

- Children age 18 or under AND are supported with the household's income;
- In your care under a foster arrangement, or qualify as homeless, migrant, or runaway youth;
- Students attending Shelby County Schools regardless of age.

A) List each child's name. Print each child's name. Use one line of the application for each child. When printing names, write one letter in each box. Stop if you run out of space. If there are more children present than lines on the application, attach a second piece of paper with all required information for the additional children.

Optional Information. Enter Birthdate and School Code (see back of application) for each child.

This optional information helps to ensure benefits are quickly given to the correct family member.

B) Is the child a student at Shelby County Schools? Mark 'Yes' or 'No' under the column titled "Student" to tell us which children attend Shelby County School. If you marked 'Yes,' write the grade level of the student in the 'Grade' column to the right.

C) Do you have any foster children? If any children listed are foster children, mark the "Foster Child" box next to the child's name. If you are ONLY applying for foster children, after finishing **STEP 1**, go to **STEP 4**. Foster children who live with you may count as members of your household and should be listed on your application. If you are applying for both foster and non-foster children, go to step 3.

D) Are any children homeless, migrant, or runaway? If you believe any child listed in this section meets this description, mark the "Homeless, Migrant, Runaway" box next to the child's name and complete all steps of the application.

STEP 2: DO ANY HOUSEHOLD MEMBERS CURRENTLY PARTICIPATE IN SNAP, TANF, OR FDPIR?

If anyone in your household (including you) currently participates in one or more of the assistance programs listed below, your children are eligible for free school meals:

- The Supplemental Nutrition Assistance Program (SNAP).
- Temporary Assistance for Needy Families (TANF).
- The Food Distribution Program on Indian Reservations (FDPIR).

A) If no one in your household participates in any of the above listed programs:

- Leave **STEP 2** blank and go to **STEP 3**.

B) If anyone in your household participates in any of the above listed programs:

Write a case number for SNAP, TANF, or FDPIR. You only need to provide one case number. If you participate in one of these programs and do not know your case number, contact: contact your local assistance office or call 1-800-382-0499. Go to **STEP 4**.

STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

How do I report my income?

- Use the charts titled "**Sources of Income for Adults**" and "**Sources of Income for Children**," printed on the back side of the application form to determine if your household has income to report.
- Report all amounts in GROSS INCOME ONLY. Report all income in whole dollars. Do not include cents.
 - Gross income is the total income received before taxes.
 - Many people think of income as the amount they "take home" and not the total, "gross" amount. Make sure that the income you report on this application has NOT been reduced to pay for taxes, insurance premiums, or any other amounts taken from your pay.
- Write a "0" in any fields where there is no income to report. Any income fields left empty or blank will also be counted as a zero. If you write '0' or leave any fields blank, you are certifying (promising) that there is no income to report. If local officials suspect that your household income was reported incorrectly, your application will be investigated.
- Mark how often each type of income is received using the check boxes to the right of each field.

STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

3.A. REPORT INCOME EARNED BY CHILDREN

A) Report all income earned or received by children. Report the combined gross income for ALL children listed in STEP 1 in your household in the box marked “Child Income.” Only count foster children’s income if you are applying for them together with the rest of your household.

What is Child Income? Child income is money received from outside your household that is paid DIRECTLY to your children. Many households do not have any child income.

3.B REPORT INCOME EARNED BY ADULTS

Who should I list here?

- When filling out this section, please include ALL adult members in your household who are living with you and share income and expenses, even if they are not related and even if they do not receive income of their own.
- **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.
 - Infants, Children and students already listed in **STEP 1.**

B) List adult household members’ names. Print the name of each household member in the boxes marked “Names of Adult Household Members (First and Last).” Do not list any household members you listed in STEP 1. If a child listed in **STEP 1** has income, follow the instructions in **STEP 3, part A.**

C) Report earnings from work. Report all income from work in the “Earnings from Work” field on the application. This is usually the money received from working at jobs. If you are a self-employed business or farm owner, you will report your net income.

What if I am self-employed? Report income from that work as a net amount. This is calculated by subtracting the total operating expenses of your business from its gross receipts or revenue.

D) Report income from public assistance/child support/alimony. Report all income that applies in the “Public Assistance/Child Support/Alimony” field on the application. Do not report the cash value of any public assistance benefits NOT listed on the chart. If income is received from child support or alimony, only report court-payments. Informal but regular payments should be reported as “other” income in the next part.

E) Report income from pensions/retirement/all other income. Report all income that applies in the “Pensions/Retirement/ All Other Income” field on the application.

F) Report total household size. Enter the total number of household members in the field “Total Household Members (Children and Adults).” This number **MUST** be equal to the number of household members listed in **STEP 1** and **STEP 3.** 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 affects your eligibility for free and reduced price meals.

G) Provide the last four digits of your Social Security Number. An adult household member must enter the last four digits of their Social Security Number in the space provided. You are eligible to apply for benefits even if you do not have a Social Security Number. If no adult household members have a Social Security Number, leave this space blank and mark the box to the right labeled “Check if no SSN.”

STEP 4: CONTACT INFORMATION AND ADULT SIGNATURE

All applications must be signed by an adult member of the household. By signing the application, that household member is promising that all information has been truthfully and completely reported. Before completing this section, please also make sure you have read the privacy and civil rights statements on the back of the application.

A) Provide your contact information. Write your current address in the fields provided if this information is available. If you have no permanent address, this does not make your children ineligible for free or reduced price school meals. Sharing a phone number, email address, or both is optional, but helps us reach you quickly if we need to contact you.

B) Print and sign your name and write today’s date. Print the name of the adult signing the application and that person signs in the box “Signature of adult.”

C) Mail Completed Form to: P.O. Box 1910 Columbiana, AL 35051 205-682-7000

D) Share children’s racial and ethnic identities (optional). On the bottom of the application, we ask you to share information about your children’s race and ethnicity. This field is optional and does not affect your children’s eligibility for free or reduced price school meals.

| Sources of Income for Children | |
|---|---|
| Sources of Child Income | Example(s) |
| Earnings from work | - A child has a regular full or part-time job where they earn a salary or wages |
| Social Security - Disability Payments - Survivor's Benefits | - A child is blind or disabled and receives Social Security benefits - A Parent is disabled, retired, or deceased, and their child receives Social Security benefits |
| -Income from person outside the household | - A friend or extended family member regularly gives a child spending money |
| -Income from any other source | - A child receives regular income from a private pension fund, annuity, or trust |

| Sources of Income for Adults | | |
|--|---|---|
| Earnings from Work | Public Assistance /Alimony / | Pensions / Retirement / All Other Income |
| - Salary, wages, cash bonuses - Net income from self-employment (farm or business) If you are in the U.S. Military: - Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances) - Allowances for off-base housing, food and clothing | - Child Support benefits - Unemployment benefits - Worker's compensation - Supplemental Security Income (SSI) - Cash assistance from State or local government - Alimony payments - Child support payments - Veteran's benefits - Strike benefits | - Social Security (including railroad retirement and black lung benefits) - Private pensions or disability benefits - Regular income from trusts or estates - Annuities - Investment income - Earned interest - Rental income - Regular cash payments from outside household |

Return Application to Any Shelby County School

or

Mail Application to:
Shelby County Schools
Child Nutrition Program
P.O. Box 1910 Columbiana, AL 35051

ONLY ONE APPLICATION PER FAMILY NEEDED, EVEN IF YOU HAVE STUDENTS AT MULTIPLE SCHOOLS (LIST ALL STUDENTS)

| SCHOOL CODES | | | |
|------------------------|-----|---------------------------|-----|
| Calera Elementary | 018 | Linda Nolen Learning Ctr | 035 |
| Calera High | 010 | Montevallo Elementary | 070 |
| Calera Intermediate | 015 | Montevallo High | 060 |
| Calera Middle | 019 | Montevallo Middle | 080 |
| Chelsea High | 020 | Mt. Laurel Elementary | 075 |
| Chelsea Middle | 023 | Oak Mountain Elementary | 083 |
| Chelsea Park | 200 | Oak Mountain High | 081 |
| Columbiana Middle | 040 | Oak Mountain Intermediate | 082 |
| Eivin Hill Elementary | 045 | Oak Mountain Middle | 084 |
| Forest Oaks Elementary | 026 | Shelby High | 090 |
| Helena High | 051 | Shelby Elementary | 110 |
| Helena Elementary | 050 | Vincent Elementary | 170 |
| Helena Intermediate | 053 | Vincent Middle High | 160 |
| Helena Middle | 052 | Wilsonville Elementary | 180 |
| Inverness Elementary | 055 | | |

Do not fill out - For School Use Only

Annual Income Conversion: Weekly x 52, Every 2 Weeks x 26, Twice a Month x 24 Monthly x 12

Total Income _____

How often?

| | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|
| Weekly | Bi-Weekly | 2x-Month | Monthly |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Household Size _____

Categorical Eligibility

Determining Official's Signature _____ **Date** _____

Confirming Official's Signature _____ **Date** _____

Verifying Official's Signature _____ **Date** _____

Eligibility:

| | | |
|-----------------------|-----------------------|-----------------------|
| Free | Reduced | Denied |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

