



GREENWOOD

FOOD SERVICE NEWSLETTER 2019-20

GREENWOOD ELEMENTARY SCHOOL

700 E. Division St., PO Box 310
Greenwood, WI 54437-9470
Phone: 715.267.7211
Fax: 715.267.7209

GREENWOOD MIDDLE/HIGH SCHOOL

306 W. Central Ave., PO Box 310
Greenwood, WI 54437-9470
Phone: 715.267-6101
Fax: 715.267.6113

For school calendar information, staff email address, sports news, resources and more, check out our website at: www.greenwood.k12.wi.us

ADMINISTRATION

Mr. Todd Felhofer

District Administrator / Middle-High School Principal

Ms. Jenni Mayenschein

Dean of Students (7-12)

Mr. Joe Green

Elementary Principal

GREENWOOD BOARD OF EDUCATION

Dean Lindner, President
Dawn Jacobson, Vice-President
Mark Shain, Treasurer
Sarah Shaw, Clerk
Jerome Krempasky, Trustee

REGULAR BOARD MTG:

- 9/9—6:30 pm—Board Rm
- 10/14—6:30 p.m.—Board Rm

ANNUAL BOARD MTG:

- 9/23—7:30 pm—Cafetorium

Food Service Program

Committed to Providing Healthy Meals

The Food Services Department is committed to providing healthy school meals and snacks to the students of the School District of Greenwood.

School meals are served to students under the National School Lunch Program and the National School Breakfast Program and follow the nutrition guidelines prescribed by The Healthy, Hunger-Free Kids Act of 2010. The law was designed to reduce the incidence of childhood obesity by providing healthier choices to students.

Five components of a healthy meal are offered: milk, fruits, vegetables, proteins and grains with strict limits on saturated fat and portion size.

School lunches meet additional standards requiring:

- Age-appropriate calorie limits.
- Larger servings of vegetables and fruits (students must take at least one serving of fruit or vegetables).
- A wider variety of vegetables, including dark green and red/orange vegetables and legumes.
- Fat-free or 1% milk (flavored milk must be fat-free).
- More whole grains.
- And less sodium.

Benefits of School Lunch

In 2011 a study, conducted by the National Centers for Health Statistics at the Centers for Disease Control and published in the Journal of Economics, showed that participation in the National School Lunch Program reduces poor general health by 29%, obesity by at least

17% and not getting enough food to sustain an active, healthy life by 3.8%.

According to research published in 2010 by the Journal of Epidemiology and Community Health, just 1.1% of children's packed lunches meet nutritional standards for school meals. USDA research indicates that children who participate in the National School Lunch Program get better nutrition compared to those who do not participate.

Federal Free and Reduced School Lunch Program

Enclosed you will find an application for the free and reduced school lunch program. This program not only helps to ease the financial burden of lunch costs for families, but the number of applications submitted also affects the amount of Title 1 funding the District receives and the eligibility of the District to apply for certain grants. **These applications are confidential.**

Please contact Lisa Hinker [715-267-6101] or Jeri Haase [715-267-7211] if you have any questions or need assistance with your application.

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FOOD SERVICE PROGRAM INFORMATION

The Food and Nutrition program is a vital part of the education services provided to the children of Greenwood School District. We offer many services for the children, for example breakfast, lunch, after school bag meals (grades 7-12), Wisconsin Milk Break (grades 4K-4) and summer school breakfast and lunch. We are proud of the high quality of food provided for the children.

Did you know?

Greenwood receives federal and state subsidies for meals served to all students. State and federal aid is paid for every student that participates in the food program, whether they are paid or in the free/reduced program. In order to receive the funding we must meet requirements set by the federal and state guidelines.

BREAKFAST REQUIREMENTS

Per federal/state guidelines, a reimbursable student breakfast meal must include **3 ITEMS**. These items include:

- 1 carton milk
- 1 cup fruit and/or juice (Any combination: 1 of each or 2 of fruit).
- 1 grain (or substitute protein. Example: string cheese and or yogurt)

LUNCH REQUIREMENTS

Per federal/state guidelines a reimbursable student meal must include a minimum of 3 out of the 5 components, with students being able to take all 5 for a reimbursable meal.

- 2 oz. meat/protein alternative,
- 1 serving bread/grain,
- 1 serving (1 cup total) of fruit or vegetables (any combination: 1/2 each or 1 cup of one or the other.)
- 1 dairy (carton) milk

If a child doesn't take a reimbursable meal they will be charged for each individual items at the a la cart price (with permission).

SPECIAL DIETARY NEEDS

The School District of Greenwood is committed to ensuring that all children have access to healthy meals that meet their dietary needs. In order to do so, a form for requesting special dietary needs [**Children with Disabilities and Special Dietary Restrictions and Dietary Request Form**] that provides

2019-20 FOOD SERVICE MEAL PRICES

BREAKFAST

4K-12 Grade Meal.....	\$1.50
Reduced.....	\$.30
Free.....	\$.00
Adults.....	\$1.90

LUNCH

4K-6 Grade Meal.....	\$2.75
7-12 Grade Meal.....	\$2.95
Reduced.....	\$.40
Free.....	\$.00
Adults.....	\$3.95

A LA CARTE PRICES

BREAKFAST

Entrée.....	\$1.60
Cereal.....	\$.75
Cereal Bar.....	\$1.00
Muffin.....	\$2.25
Donut.....	\$1.25
Bagel.....	\$1.00
String Cheese.....	\$.55
Yogurt.....	\$.75
Fruit.....	\$.50
Milk.....	\$.25
Juice.....	\$.40

LUNCH

Entrée.....	\$2.75
Small Salad.....	\$2.25
Fruit.....	\$.50
Milk.....	\$.25
Juice.....	\$.40
After School Bag Lunch ...	\$4.75

guidance and documentation for school meals is available on the district website under the food service area. You can also request a copy of this form from either building office.

Our food service staff are all certified in proper food preparations. The food service program has two inspections per year by a state certified inspector.

If you have any questions please contact Jeri Haase, Food Service Director phone 715.267.7211 ext. 5527, and leave a message or via e-mail: jehaase@greenwood.k12.wi.us

A LA CARTE PURCHASES

Students in elementary and middle/high school who have a la carte permission forms on file may charge individual a la carte items to their family food service accounts. Please see the permissions form that each building have that indicates the items that are available to be purchased.

All students (grades 4K-12) who have purchased a meal will be permitted to receive a second serving of fruits, vegetables and/or salad bar at NO EXTRA COST.

If family accounts fall below -\$50.00, a la carte status will be inactivated until account balance is back in good standing.

FOOD SERVICE ACCOUNTS

The Board has established a policy to maintain control over meal accounts which are not kept at a positive balance. Prepayment is required in family meal accounts, which includes charges for breakfast, lunch and other ala carte items.

NOTIFICATIONS

Every effort will be made by the School District of Greenwood to keep parent(s)/guardian(s) informed regarding their family meal account. However, it is ultimately the responsibility of the parent(s)/guardian(s) to maintain a positive balance in their account so that the district can provide meals to their children. Regular and reduced-price families will be asked to make an initial deposit of at least \$25 to activate their family accounts. The maximum amount that a family account will be allowed to go in the negative is \$50.

- ◆ **Family Access:** Through this online program parents have the ability to track student activity/usage, and view their family balance.
- ◆ An automated courtesy phone call will be made on Wednesday and Sunday evenings to families with a balance of less than \$25.00.
- ◆ **When a family meal account becomes negative:** Notifications to parents/guardians will be made.
- ◆ **When a family meal account becomes -\$25.00:** A letter will be mailed to the parent(s)/guardian(s) letting them know that they need to deposit funds into their account so that their children can continue to participate in meal program(s). An automated phone call will be made on Wednesdays and Sundays to families with a balance that is -\$25.00.
- ◆ **When a family meal account becomes -\$50.00 -** A personal call will be made by a school representative to let parent(s) know that they will need to provide meals from home for their child(ren) until sufficient funds are deposited in their account to bring it back to a positive balance. A follow up certified letter will

also be sent to remind parents/guardians that the school meal account is de-activated.

A student may pay for a daily meal, even if their account is negative.

Students eligible for free meals will not be denied a meal because of a negative account balance, however they will not be allowed to charge a la carte items, including milk to have with a cold lunch.

UNCOLLECTED BALANCES

The school board authorizes administrators to collect food service charges that are 60 days delinquent through legal means including but not limited to small claims court or use of a collection agency. Costs for collection may be added to the family account.

At the end of the school year, a certified letter will be sent to families whose accounts are \$25 or more in arrears stating that the negative balance must be paid prior to the start of the next school year.

A student may not participate in the graduation ceremony if his/her meal account has a negative balance.

The business manager and district administrator shall review all outstanding obligations and approve for write-off any debt which they determine remains non-collectable at the end of each fiscal year.

REFUNDS

When a family no longer has children attending school, moves out of the district, or becomes eligible for free meals, the family may request reimbursement of any balance over \$1.00 in the family account. Funds for families with students continuing the following school year will remain in the family account for the next year.

FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED PRICE SCHOOL MEALS FOR SCHOOL YEAR 2019-20

Dear Parent/Guardian:

Children need healthy meals to learn. GREENWOOD SCHOOL DISTRICT offers healthy meals every school day. Breakfast costs **[\$1.50]**; lunch costs **[\$2.75/ELEM, \$2.95/MS-HS]**. Your children may qualify for free meals or for reduced price meals. Reduced price is **[\$.30]** for breakfast and **[\$.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 FoodShare, the Food Distribution Program on Indian Reservations (FDPIR)], or W-2 cash benefits are eligible for free meals, when listed on the application.
- 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 qualify to receive free or reduced price meals if your household’s income is at or below the limits on the Federal Income Eligibility Guidelines.

FEDERAL ELIGIBILITY INCOME CHART FOR SCHOOL YEAR 2019-2020			
Household size	Yearly (\$)	Monthly (\$)	Weekly (\$)
1	23,107	1,926	445
2	31,284	2,607	602
3	39,461	3,289	759
4	47,638	3,970	917
5	55,815	4,652	1,074
6	63,992	5,333	1,231
7	72,169	6,015	1,388
8	80,346	6,696	1,546
Each additional person:	8,177	682	158

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 been told your children will get free meals, please call or e-mail, **LISA HINKER | PH: 715-267-6101 | EMAIL: lihinker@greenwood.k12.wi.us**
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: **LISA HINKER | PO BOX 310 | 306 W CENTRAL AVE | GREENWOOD WI 54437 | PH: 715-267-6101,**
4. **SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE OR REDUCED PRICE MEALS?** Please read the letter you received carefully and follow the instructions. If your letter indicated you qualify for free meals, then no application is needed. If any children in your household were missing from your eligibility notification, contact **LISA HINKER | PH: 715-267-6101 | EMAIL: lihinker@greenwood.k12.wi.us** immediately. If your household was notified it qualified for reduced price meals, we encourage you to complete an application to potentially qualify for free meals based on household size and income.
5. **DO I NEED TO FILL OUT AN APPLICATION IF MY CHILD ATTENDS A COMMUNITY ELIGIBILITY PROVISION SCHOOL (CEP)?** If your child attends a school that participates in CEP, receipt of free breakfast and lunch meals does not depend on returning this application. However, this information is necessary for other programs and may be used to determine if your household is eligible for additional benefits.
6. **[if no online application, schools should delete this paragraph] CAN I APPLY ONLINE?** Yes! You are encouraged to complete an online application instead of a paper application if you are able. The online application has the same requirements and will

ask you for the same information as the paper application. Visit [website] to begin or to learn more about the online application process. Contact **LISA HINKER | PH: 715-267-6101 | EMAIL: lihinker@greenwood.k12.wi.us** if you have any questions about the application process.

7. **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 [date], or when a new eligibility is determined. You must submit a new application unless the school told you that your child is eligible for the new school year. If you do not submit 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.
8. **I GET WIC. CAN MY CHILDREN GET FREE MEALS?** Children in households participating in WIC may be eligible for free or reduced price meals, but it is based on income. Please submit an application.
9. **MY CHILD(REN) QUALIFIES FOR BADGERCARE PLUS OR MEDICAID. CAN MY CHILD GET FREE MEALS?** Children with BadgerCare Plus, Medicaid, or subsidized insurance may be eligible for free or reduced price meals, but it is based on household income and income size. Please submit an application to determine if your household qualifies.
10. **WILL THE INFORMATION I GIVE BE CHECKED?** Yes. We may also ask you to send written proof of the household income you report.
11. **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 or experience a financial hardship may become eligible for free and reduced price meals if the household income drops below the income limit.
12. **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: **TODD FELHOFER | PH: 715-267-6101 | EMAIL: tofelhofer@greenwood.k12.wi.us**
13. **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.
14. **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.
15. **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.
16. **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. Do not include any combat pay resulting from deployment as income.
17. **WHAT IF THERE IS NOT 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.
18. **MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR?** To find out how to apply for FoodShare or other assistance benefits, contact your local assistance office or call 1-800-362-3002.

If you have other questions or need help, call 715-267-6101.

Sincerely,

Lisa Hinker

HOW TO APPLY FOR FREE AND REDUCED PRICE SCHOOL MEALS for 2019-20 School Year

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 **GREENWOOD SCHOOL DISTRICT**. The application must be filled out completely to certify your children for free or reduced price school meals. Please follow these instructions in order. If at any time you are not sure what to do next, please contact **LISA HINKER, DIST ADMIN ASST, GREENWOOD SCHOOL DISTRICT, 715-267-6101, X2222, EMAIL: lihinker@greenwood.k12.wi.us**. If your child attends a Community Eligibility Provision School (CEP), receipt of free breakfast and lunch meals does not depend on returning this application; however, this information is necessary for other programs.

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 grades 12 or under AND are supported with the household's income; and
- In your care under a foster arrangement, or qualify as homeless, migrant, or runaway youth, or enrolled in a Head Start program.

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 in household than lines on the application, attach a second piece of paper with all required information for the additional children.

B) Enter the grade and the name of the school the child attends or mark n/a if not in school.

C) Do you have any foster children? If any children listed are foster children, mark the "Foster Child" box next to the children's names. 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, runaway or enrolled in a Head Start program? If you believe any child listed in this section meets this description, mark the "Homeless, Migrant, Runaway or Head Start" box next to the child's name and complete all steps of the application.

STEP 2: DO ANY HOUSEHOLD MEMBERS CURRENTLY PARTICIPATE IN FoodShare, W-2 Cash Benefits 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) or FoodShare.
- Temporary Assistance for Needy Families (TANF) or W-2 Cash Benefits.
- 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 or check "No" and go to **STEP 3**.

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

- Write a case number and name of the assistance program you or any member of the household participates in for FoodShare, W-2 Cash Benefits, 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 your case worker. Medicaid and BadgerCare case numbers do NOT qualify for free or reduced price meals.
- 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 Children**" and "**Sources of Income for Adults**," 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" (listed as "net pay" on paycheck stub) 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.

<ul style="list-style-type: none"> 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 boxes to the right of each field. 	
<p>3.A. REPORT INCOME EARNED BY CHILDREN</p> <p>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 personal income if you are applying for them together with the rest of your household.</p> <p>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.</p>	
<p>3.B. REPORT INCOME EARNED BY ADULTS</p> <p>List adult household members' names.</p> <ul style="list-style-type: none"> Print the name of each household member in the boxes marked "Name of Adult Household Members (First and Last)." When filling out this section, please include ALL adult members in your household who are living with you and share income and expenses, <u>even if they are not related and even if they do not receive income of their own.</u> Do NOT include: <ul style="list-style-type: none"> 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. 	
<p>C) Report earnings from work. Report all total gross income (before taxes) 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.</p> <p>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.</p> <p>F) Fluctuating Income. For seasonal workers and others whose income fluctuates and usually earn more money in some months than others. In these situations, project the annual rate of income and report that. This includes workers with annual employment contracts but may choose to have salaries paid over a shorter period of time; for example, school employees.</p>	<p>D) Report income from public assistance/child support/alimony/SSI/VA benefits. Report all income that applies in the "Public Assistance/Child Support/Alimony" field on the application. <u>Do not report the cash value of any public assistance benefits NOT listed on the chart.</u> If income is received from child support or alimony, only report court-ordered payments. Informal but regular payments should be reported as "other" income in the next part.</p>
<p>E) Report income from pensions/retirement/all other income. Report all income that applies in the "Pensions/Retirement/ Social Security/All Other Income" field on the application.</p>	<p>H) Provide the last four digits of your Social Security Number (SSN). An adult household member must enter the last four digits of their SSN in the space provided. You are eligible to apply for benefits even if you do not have a SSN. If no adult household members have a SSN, leave this space blank and mark the box to the right labeled "Check box if no SSN."</p>
<p>STEP 4: CONTACT INFORMATION AND ADULT SIGNATURE</p> <p>An adult member of the household must sign the application. 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.</p>	
<p>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.</p>	<p>B) Print or sign your name. The adult filling out the application must print or sign their name in the signature box.</p>
<p>C) Return completed form to: LISA HINKER, GREENWOOD SCH DIST PO BOX 310, 306 W CENTRAL AVE, GREENWOOD WI 54437</p>	<p>D) Share children's racial and ethnic identities (optional). On the back 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.</p>

2019-2020 Household Application for Free and Reduced Price School Meals

Apply online at: N/A.

Complete one application per household. Please use a pen (not a pencil).
 In Community Eligibility Schools (CEP), receipt of free breakfast and lunch meals does not depend on returning this application; however, this information is necessary for other programs.

STEP 1 List ALL infants, children, and students up to and including grade 12 who are Household Members

If more spaces are required for additional names, attach another sheet of paper.

Definition of Household Member: "Anyone who is living with you and shares income and expenses, even if not related."

Child's First Name	MI	Child's Last Name	Grade	School the child attends or NA if not in school	Foster Child	Homeless, Migrant, Runaway
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

Check all that apply

STEP 2 Do any Household Members (including you) currently participate in any of the following assistance programs: FoodShare, W-2 Cash Benefits, or FDP/IR?

If you answered NO > Complete STEP 3. If you answered YES > Write a case number here, then go to STEP 4 (Do not complete STEP 3)

Case Number: _____ Program Name Required: _____
 Write only one case number in this space. Medicaid and Badger Care do not qualify.

STEP 3 Report Income for ALL Household Members (Skip this step if you answered 'Yes' to STEP 2)

Flip the page and review the charts titled "Sources of Income" for more information.

A. Child Income

Sometimes children in the household earn income. Please include the TOTAL income earned by all infants, children, and students up to and including grade 12 listed in STEP 1 here.

Child Income: \$ _____
 How often? Weekly Bi-Weekly 2x Month Monthly

B. All Adult Household Members (including yourself)

List all 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 total gross income (before taxes) for each source in whole dollars only (no cents). If they do not receive income from any source, write '0'. If you enter '0' or leave any fields blank, you are certifying (promising) that there is no income to report.

Name of Adult Household Members (First and Last Name)	C. Earnings from Work		D. Public Assistance/Alimony/SSI/VA Benefit		E. Pensions/Retirement/Other Income		F. Seasonal Workers, and others with fluctuating income, project the annual income and report here	
	Weekly	Bi-Weekly	2x Month	Monthly	Weekly	Bi-Weekly	2x Month	Monthly
	\$		\$		\$		\$	
	\$		\$		\$		\$	
	\$		\$		\$		\$	
	\$		\$		\$		\$	
	\$		\$		\$		\$	

G. Total Household Members (Children and Adults)—REQUIRED

H. Last Four Digits of Social Security Number (SSN) of Primary wage Earner or Other Adult Household Member—REQUIRED or Check box if no SSN

SSN: []
 Check box, if no SSN

STEP 4 Contact information and adult signature

Return completed form to your school.

Insert your school district mailing address here

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 if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable state and federal laws.

Street Address (if available): _____ Apt.#: _____ City: _____ State: _____ Zip: _____
 Daytime Phone and Email (optional): _____
 Printed Name OR Signature of Adult Completing this application—REQUIRED: _____ Today's Date Mo./Day/Yr.: _____

INSTRUCTIONS

Source of Income

Sources of Income for Children

Sources of Child Income	Example(s)
- Gross earnings from work	- A child has a regular full or part-time job where they earn a salary or wages
- Social Security	- A child is blind or disabled and receives Social Security benefits
- Disability payments	- A parent is disabled, retired, or deceased, and their child receives Social Security benefits
- Survivor's 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 / Child Support	Pensions / Retirement / All Other Income
- Gross salary, wages, cash bonuses - Net income from self-employment (farm or business); FARM —refer to line 18 of Schedule 1 or line 34 from Schedule F; BUSINESS —refer to line 12 of Schedule 1 or line 31 from Schedule C. - 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	- 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

OPTIONAL Children's Racial and Ethnic Identities

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 optional and does not affect your children's eligibility for free or reduced price meals.

Ethnicity *Check one* Hispanic or Latino Not Hispanic or Latino
 Race *Check one or more* American Indian or Alaskan Native Asian Black or African American Native Hawaiian or Other Pacific Islander White

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 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, 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 conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotope, 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, 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:

Mail: U.S. Department of Agriculture
 Office of the Assistant Secretary for Civil Rights
 1400 Independence Avenue, SW Washington, D.C. 20250-9410
 Fax: (202) 690-7442, or
 Email: program.intake@usda.gov

This institution is an equal opportunity provider.

The above address is for discrimination complaint purposes only. Return this complete application to your school, not USDA.

Do not fill out

For School Use Only

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

Total Income	Weekly	Bi-Weekly	2x Month	Monthly	Yearly	Household Size	Categorical Eligibility	Eligibility	Date Denied	Reason for Denial or Withdrawal
	<input type="checkbox"/>	Free <input type="checkbox"/> Reduced <input type="checkbox"/> Denied <input type="checkbox"/>	Free <input type="checkbox"/> Reduced <input type="checkbox"/> Denied <input type="checkbox"/>	Mo./Day/Yr.						
Determining Official's Signature	Date Mo./Day/Yr.					Confirming Official's Signature	Date Mo./Day/Yr.		Verifying Official's Signature	Date Mo./Day/Yr.

Required for Verification process only

Required for Verification process only

For schools participating in CEP only:

Are all students on this application from a CEP school? Yes No
 If YES, the processing of this application cannot be paid for by the nonprofit school food service account. Only non-CEP applications are used for selecting the verification sample, conducting an independent review of applications, and the Certification and Benefit Issuance portion of the Administrative Review.



PO BOX 310 | 306 W CENTRAL AVE
GREENWOOD WI 54437

JULY 2019

S	M	T	W	TH	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

SEPTEMBER 2019

S	M	T	W	TH	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

* Labor Day—Holiday

NOVEMBER 2019

S	M	T	W	TH	F	S
		1	2			
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

JANUARY 2020

S	M	T	W	TH	F	S
	1	2	3	4		
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

MARCH 2020

S	M	T	W	TH	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

MAY 2020

S	M	T	W	TH	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

* Memorial Day—Holiday

AUGUST 2019

S	M	T	W	TH	F	S
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

OCTOBER 2019

S	M	T	W	TH	F	S
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

DECEMBER 2019

S	M	T	W	TH	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

FEBRUARY 2020

S	M	T	W	TH	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29

APRIL 2020

S	M	T	W	TH	F	S
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

JUNE 2020

S	M	T	W	TH	F	S
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

School District of Greenwood 2019-20 STUDENT CALENDAR

AUGUST 2019
28 Open House 4:00-8:00 pm

SEPTEMBER 2019
2 Labor Day (No School For Students & Staff)
3 First Day of School

OCTOBER 2019
24 Parent Teacher Conferences (4:00-8:00 pm)
25 Parent-Teacher Conferences (8:00 am—12:00 pm) (No School for Students)

NOVEMBER 2019
5 Student Early Release—End of 1st Quarter / Teacher Records Day
6 2nd Quarter Begins
15 Teacher In-Service (No School for Students)
27-29 Holiday Break (No School for Students & Staff)

DECEMBER 2019
20 Student & Staff Early Release / Winter Break
23-31 Winter Break (No School for Students & Staff)

JANUARY 2020
1 Winter Break (No School for Students & Staff)
2 School Resumes
20-22 Semester Exams for 9-12 Grade Students
22 End of 2nd Quarter / 1st Semester
23 Teacher Records Day (No School For Students)
24 Teacher In-Service (No School For Students)
27 3rd Quarter Begins

FEBRUARY 2020
14 Teacher In-Service (No School for Students)
27 Parent/Teacher Conferences (4:00-8:00 pm)

MARCH 2020
20 Teacher In-Service (No School for Students)
31 Student Early Release / End of 3rd Quarter / Teacher Records Day

APRIL 2020
1 4th Quarter Begins
9-13 Holiday Break (No School for Students & Staff)

MAY 2020
23 Class of 2020 Graduation Ceremony - 11:00 a.m.
25 Memorial Day (No School for Students/Staff)

JUNE 2020
2-4 Semester Exams for 9-12 Grade Students
5 Early Release / Last Day of School for Students / 4th Quarter—2nd Semester Ends / Teacher Records Day

SUMMER SCHOOL
Summer School will run from **JUNE 8 — JULY 17**.
More information will be sent home with students at a later date.

EARLY RELEASE TIMES:
Greenwood Elementary School at 12:15 p.m.
Greenwood Middle/High School at 12:30 p.m.

STUDENT DATES:	TOTAL
1ST QUARTER.....46	
2ND QUARTER.....44	
3RD QUARTER.....46	
4TH QUARTER.....44	
TOTAL.....178	

BOARD APPROVED: 11/12/2018