

PLEASE HAVE THIS FORM COMPLETED PRIOR TO THE MARCH 17TH POSTMARK DEADLINE.

Dear school official,

Please verify that the student listed below is eligible for the Household Meal Benefit Program (FARMS) for the 2013-14 school year. This information will be used to determine eligibility to enter the lottery for admission to The SEED School of Maryland. If you have any questions please feel free to contact Nedra Davis, Director of Admissions at (410) 843-9482.

Student Name:	
School:	
I (parent/guardian)to release informate status for the 2012-2013 school year to The SEED School of Maryland	tion regarding my child's free or reduced meal
Please check the box that applies:	
☐ Free meals	
☐ Reduced-price meals	
□ Not eligible	
School official print name	Date
School official signature	Phone Number

Please mail or fax this document by the application deadline of <u>March 17, 2014</u> attention: Admissions, The SEED School of Maryland.

200 Font Hill Avenue Baltimore, MD 21223 (410) 843-9496 fax