

SHAMOKIN AREA SCHOOL DISTRICT
DEPARTMENT OF FOOD & NUTRITION
2000 WEST STATE STREET
COAL TOWNSHIP, PA 17866

INFORMATION SHEET & FREE/REDUCED LUNCH APPLICATION **2010-11 SCHOOL YEAR**

Dear Parent/Guardian,

Our school meal programs continue to support the required federal & state national nutritional standards, while offering a variety of foods based on the students' preferences. We ask that you encourage your children to utilize the school Lunch & Breakfast Programs as a basis for developing nutritional habits that will last a lifetime. The following is provided to give you general information concerning our meal programs. At any time, you may contact the Food Service Department with questions at 648-5752 ext 3632

WHAT IS A SCHOOL LUNCH?

To comply with state and federal regulations the following five meal components must be Offered in order to qualify as a lunch:

EXAMPLE

MEAT/MEAT ALTERNATIVE 2-3 oz. Cheeseburger or Chicken Nuggets BREAD/GRAIN or BREAD ALTERNATIVE 8 - 10/week Roll or Pasta (1/2 cup cooked rice, noodles, macaroni, pasta, cereal) VEGETABLE Together must= Tossed Salad AND/OR FRUIT ¼ cup Sliced Peaches MILK ½ PINT White or Flavored (8 oz) Low-Fat Milk
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Every day all 5 meal components are offered. Because we participate in the *offer versus serve* program, students have the choice to decline one or two of the meal components. Therefore, when selecting a School Lunch, a student may choose 3, 4, or all 5 of the meal components.

SCHOOL MEAL PRICES

As you may be aware the district food service program is not immune from the rising costs in labor, food, supply and fuel. Additionally our federal & state nutrition standards have become more strict which also contributes to our increased costs, therefore, meal prices have been affected as follows: (*increase of \$.05 from 2009-10*)

Prices for our reimbursable school meals will be are as follows:

Lunch \$2.25 for Middle/High High School students
\$2.00 for Elementary and Annex students
\$1.65 for extra main dish or entree with the purchase of a lunch
\$.40 for Reduced
Breakfast \$1.50 for Middle/High High School students
\$1.10 for Elementary and Annex students
\$.30 for Reduced
\$.55 for an 8 oz. Container of milk

PURCHASING OPTIONS

MS/HS students may purchase an extra entree with the purchase of a lunch for \$1.65

MS/HS students may purchase any component of the meal a'la carte

Elementary students k-4 – 3rd will **not** be served and extra entrée or double lunch unless Food & Nutrition receives parent approval, **in writing**, to do so.

Elementary students 4th- 6th may purchase a salad/vege boat and/or fruit a'la carte or extra entrée for \$1.60 or double lunch with the purchase of a lunch.

Milk is included with the purchase of a breakfast or lunch.

However milk may be purchased a'la carte by any k-4 – 12th grade students.

Remember students must have money in their account to purchase any a'la carte item

CAFETERIA PURCHASES - CAFTRAC

CAFTRAC

CAFTRAC is a computerized cafeteria system, used at all buildings within the district.

Money must be available in student's account for them to make breakfast, lunch and/or a la carte purchases (see attached charge policy).

If you **do not want your child to make cafeteria purchases** please notify me in writing.

Prepayments/Deposits into an account may be made in the form of cash or check.

One of the most convenient ways to deposit money is to **write a check**. Checks are to be made out to the **SASD CAFTRAC** with the child's full name noted in the memo section. Your child can deposit the check or you can mail it. By writing a check, you can be assured the money you send in is deposited into your child's CAFTRAC account. At the Middle/High School by mailing a check your child never needs to stand in line to make a deposit.

If you have more than one child in a building you can send just one check, but must note their names and how much money you would like issued to each child's account. You can feel free to call me at any time to check your child's account balance or meal history.

At the **Middle/High School building** deposits can be made at the CAFTRAC office 7:25-7:40AM and during each Cafeteria period.

Elementary and Annex buildings deposits will be accepted in homeroom, any day, but **must be received in an envelope** noting the student's full name, grade and teacher name on the front of the envelope.

FREE & REDUCED MEAL APPLICATION

An application for free and reduced meals **must** be completed each year.

DO NOT assume that if your child(ren) were eligible last year, that they are automatically approved and eligible this year.

For your convenience, **only one application per family** is needed regardless of which school building in the Shamokin district they attend.

Applications are included in this mailing, and are also **available through** each student's homeroom teacher, at each building's principal's office and **online** at

www.indians.k12.pa.us (printable copy to be filled out manually) or completed and submitted online at www.compass@state.pa.us

Breakfast will be available in all buildings beginning September 7, 2010.

REMEMBER If your child(ren) are entitled to **free meals, breakfast is no charge**, if entitled to **reduced meals breakfast is \$.30**. Breakfast is an optional meal and like a la carte, without money in a student's account, cannot be purchased or charged.

Breakfast and Lunch Menus are available on the Shamokin Area school website www.indians.k12.pa.us and every week in the New Item, Daily Item and Press Enterprise.

IN SCHOOL SUSPENSION - Jr/Sr High School students assigned to In School Suspension (ISS) will be allowed to purchase the lunch of the day **only**. No a la carte purchases will be allowed.

WELLNESS- In our commitment to addressing the very important issue of childhood obesity, the Shamokin Area School District cafeterias will promote a healthy school environment by providing nutritional meal choices during your child(ren's) time at school. You will also begin to receive information to encourage and educate you as parents/guardians to participate in providing more nutritional choices as you supply items for classroom parties and when choosing fund-raising items. We wish to partner with you to help develop good nutritional habits that will last a lifetime for your child(ren)

SHAMOKIN AREA SCHOOL DISTRICT INSTRUCTIONS AND APPLICATION FOR FREE/REDUCED LUNCH

Dear Parent/Guardian:

July 2010

Children need healthy meals to learn. The SHAMOKIN AREA SCHOOL DISTRICT offers healthy meals every school day. Breakfast is available at the Elementary & Annex Schools for \$1.10; and at the Middle & High School for \$1.50. Lunch is available at the Elementary and Annex for \$2.00 and at the Middle & High School for \$2.25. Your children may qualify for free meals or for reduced price meals. Reduced price is \$.30 for breakfast and \$.40 for lunch.

1. 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:**

Elementary or Annex – to your child's teacher or principal's office

Middle or High School – CAFTRAC office or any Food Service cashier

OR Mail to: CAFTRAC office, SASD 2000 W. State Street Coal Township, PA 17866

2. Who can get free meals? Children getting Food Stamps or TANF and most foster children can get free meals regardless of your income. Also, your child(ren) can get free meals if your household income is within the free limits on the Federal Income Guidelines.

3. Can homeless, runaway, and migrant children get free meals? Please call Chris Venna, High School Principal at 648-5752 to see if your child(ren) qualify(ies), if you have not already been informed that they will get free meals.

4. Who can get reduced price meals? Your child(ren) can get low cost meals if your household income is within the reduced price limits on the Federal Income Chart, shown on this application.

5. Should I fill out an application if I got a letter this school year saying my children are approved for free or reduced price meals? Please read the letter you got carefully and follow the instructions. Call the school at 648-5752 x3632 if you have questions.

6. I get WIC. Can my child(ren) get free meals? Children in households participating in WIC may be eligible for free or reduced price meals. Please fill out an application.

7. Will the information I provide be checked? Yes, we may ask you to send written proof.

8. If I don't qualify now, may I apply later? Yes. You may apply at any time during the school year if your household size goes up, income goes down, or if you start receiving Food Stamps or TANF. If you lose your job, your children may be able to get free or reduced price meals. Contact your school.

9. What if I disagree with the school's decision about my application? You should talk to your school officials. You also may ask for a hearing by calling or writing to: Steve Curran, Shamokin Area School District, Business Manager 2000 W. State Street Coal Township, PA 17866

10. May I apply if someone in my household is not a U.S. citizen? Yes. You or your child(ren) do not have to be a U.S. citizen to qualify for free or reduced price meals.

11. Who should I include as members of my household? You must include all people living in your household, related or not (such as grandparents, other relatives, or friends). You must include yourself and all children who live with you.

12. What if my income is not always the same? List the amount that you normally get. For example, if you normally get \$1000 each month, but you missed some work last month and only got \$900, put down that you get \$1000 per month. If you normally get overtime, include it, but not if you get it only sometimes.

13. We are in the military, do we include our housing allowance as income? If your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. All other allowances must be included in your gross income.

If you have other questions or need help call 648-5752 ext. 3632

Si necesita ayuda, por favor llame al teléfono Si vous voudriez d'aide, contactez nous au numero

INSTRUCTIONS FOR APPLYING

If your household gets **FOOD STAMPS OR TANF**, follow these instructions:

Part 1: List child(ren)'s name, school, grade, and a Food Stamp or TANF case number. (9 digits)

Part 2: Check the appropriate box, if any, **and contact** Chris Venna, High School Principal at 648-5752.

Part 3: Skip this part.

Part 4: Skip this part.

Part 5: Sign the form. A Social Security Number is not necessary.

Part 6: Answer this question if you choose to.

If you are applying for a **FOSTER CHILD**, follow these instructions:

Part 1: Use a separate application for each foster child. List the child's name, school, and grade.

Part 2: Skip this part.

Part 3: Check the box and list the child's personal use monthly income, if any.

Part 4: Skip this part.

Part 5: Sign the form. A Social Security Number is not necessary.

Part 6: Answer this question if you choose to.

ALL OTHER HOUSEHOLDS, including WIC households, follow these instructions:

Part 1: List each child's name, school, and grade.

Part 2: Check the appropriate box, if any.

Part 3: Skip this part.

Part 4: Follow these instructions to report total household income during last month.

Column 1–Name: List the first and last name of **each** person living in your household, related or not (such as grandparents, other relatives, or friends). You must include yourself and all children living with you. Attach another sheet of paper if you need to.

Column 2–How often did you get paid last month and what was the Gross amount. Next to each person's name list each type of income received last month, and how often it was received. For example, *Earnings from work*: List the **gross income** each person earned from work. This is not the same as take-home pay. **Gross income is the amount earned before taxes and other deductions.** The amount should be listed on your pay stub, or your boss can tell you. Next to the amount, write how often the person got it (weekly, every other week, twice a month, or monthly). *All other income*: List the amount each person got last month from welfare, child support, alimony (second column), pensions, retirement, Social Security (third column), and ALL OTHER INCOME SOURCES (fourth column). In the All Other column, include Worker's Compensation, unemployment, strike benefits, regular saving account withdrawals, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), disability benefits, regular contributions from people who do not live in your household, and ANY OTHER INCOME. Report net income for self-owned business, farm, or rental income. Next to the amount, write how often the person got it. If you are in the Military Housing Privatization Initiative, do not include this housing allowance.

Column 3–Check if no income: If the person does not have any income, check the box.

Part 5: An adult household member must sign the form and list his or her Social Security Number, or mark the box if he or she doesn't have one.

Part 6: Answer this question if you choose to.

FREE & REDUCED PRICE SCHOOL MEALS APPLICATION 2010-2011

Part 1. Children in School (Use a separate application for each foster child)			
Names of all children in school (First, Middle Initial, Last)	School Name	Grade	Food Stamp or TANF case # (if any). Skip to Part 5 if you list a Food Stamp or TANF case #
			- - - - -
			- - - - -
			- - - - -
			- - - - -
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Part 2. If the child you are applying for is homeless, migrant, or a runaway check the appropriate box and call [your school, homeless liaison, migrant coordinator at phone #] Homeless Migrant
Runaway

Part 3. Foster Child
If this application is for a child who is the legal responsibility of a welfare agency or court, check this box and then list the amount of the child's personal use monthly income: \$ _____. Skip to Part 5.

Part 4. Total Household Gross Income—You must tell us how much and how often

1. Name (List everyone in household) <i>(Example)</i> Jane Smith	2. Gross income and how often it was received <i>Example: \$100/monthly \$100/twice a month \$100/every other week \$100/weekly</i>				3. Check if NO income
	Earnings from work before deductions	Welfare, child support, alimony	Pensions, retirement, Social Security	All Other Income	
	\$200/weekly	\$150/weekly	\$100/monthly	\$ ____/____	<input type="checkbox"/>
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>

Part 5. Signature and Social Security Number (Adult must sign)
An adult household member must sign the application. If Part 4 is completed, the adult signing the form must also list his or her Social Security Number or mark the "I do not have a Social Security Number" box. (See Privacy Act Statement on the back of this page.)
I certify (promise) that all information on this application is true and that all income is reported. I understand that the school will get Federal funds based on the information I give. I understand that school officials may verify (check) the information. I understand that if I purposely give false information, my child(ren) may lose meal benefits, and I may be prosecuted.
Sign here: X _____ Print name: _____ Date: _____
Address: _____ Phone Number: _____
Social Security Number: _____ I do not have a Social Security Number

Part 6. Children's racial and ethnic identities (optional)

Mark one or more racial identities:		Mark one ethnic identity:
<input type="checkbox"/> Asian	<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Hispanic or Latino
<input type="checkbox"/> White	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	<input type="checkbox"/> Not Hispanic or Latino
<input type="checkbox"/> Black or African American	<input type="checkbox"/> Other	

Don't fill out this part. This is 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: _____ Per: Week, Every 2 Weeks, Twice A Month, Month, Year Household size: _____
Categorical Eligibility: _____ Date Withdrawn: _____ Eligibility: Free ___ Reduced ___ Denied ___ Reason: _____
Temporary: Free ___ Reduced ___ Time Period: _____ (expires after ___ days)
Determining Official's Signature: _____ Date: _____
Confirming Official's Signature: _____ Date: _____ Follow-up Official's Signature: _____ Date: _____