**HOW TO APPLY FOR FREE AND REDUCED PRICE SCHOOL MEALS**

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 **Texans Can Academy**. 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. Information requested is the same that will be needed to complete an on-line application. If at any time you are not sure what to do next, please contact your campus registrar or admission office. You may also contact Student Nutrition Services, **Felecia Morris @ 214-875-4104**.

**PLEASE USE A PEN (NOT A PENCIL) WHEN FILLING OUT THE APPLICATION, NO WHITE OUT. DO YOUR BEST TO PRINT CLEARLY.**

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| **STEP 1: LIST ALL CHILDREN IN SCHOOL IN THE HOUSEHOLD.** |

Tell us how many children in school live in your household. They do NOT have to be related to you to be a part of your household. If there are more children present than lines on the application, complete a separate application with the additional names and attached it together. In the top corner of the applications list them as 1 of 2 pages.

**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, runaway, or Head Start;
* Student(s) enrolling in Texans Can! Academy.
1. **List each student’s name.**
	* Print each child’s legal name clearly. (If you need additional lines, use a separate application for the additional children).
	* Beside the name of each child, write the Social Security number, state id, or the TEXANS Can student ID number (*returning students only)*.
	* Check the appropriate box if a child is under a foster arrangement, qualify as homeless, migrant, runaway, or Head Start.
2. **Do you have any foster children?**
	* If so, check the “Foster Child” box next to the child’s name.
	* **If you are *ONLY applying for the foster children*, complete STEP 1 and if they have income list it in Step 3. Then go to STEP 4.**
	* When applying for both foster and non-foster children, within a household, be sure to indicate your foster child.
	* If more than one child has income, calculate the total amount for all of the children and write it in the income box shown in Step 3.
3. **Are any children homeless, migrant, runaway, or Head Start?** If you believe any child listed in this section meets this description, mark the corresponding box next to the child’s name and complete all steps of the application. Please provide proof of migrant, foster, or homeless (see campus registrar.

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| **STEP 2: DO ANY HOUSEHOLD MEMBERS (INCLUDING YOU) CURRENTLY PARTICIPATE IN ONE OR MORE OF THE FOLLOWING ASSISTANCE PROGRAMS:** **SUPPLEMENTAL NUTRITION PROGRAM (SNAP), TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF), OR FOOD DISTRIBUTION PROGRAM ON INDIAN RESERVATIONS (FDPIR)?** |

1. **What to do if no one in your household participates in any of the above listed programs:**
	* **Circle ‘NO’ and proceed to STEP 3.**
2. **What to do if anyone in your household participates in any of the above listed programs:**
	* **Circle ‘YES’**
	* **Provide the Eligibility Determination Group (EDG) number. (8-9 digit number)** If you do not know your EDG number, contact your local TANF/SNAP agency. You **must** provide an EDG number on your application to qualify for free meals.
	* **Go to STEP 4.**

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| **STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS.** |

1. **ADULT HOUSEHOLD MEMBERS**
	* List all ADULT household members in Step 3. (Include yourself but *do not include* children) Children should be listed in Step 1 only.
		+ 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.
	* Report the income for all household members listed as earned from work, Public Assistance, Child Support/Alimony, Pension, Retirement, or All other income.
	* Specify how often (Weekly, Every 2 weeks, Twice per month, or Monthly) the income is received beside each name. Report income in whole dollar amounts.
		+ **List the gross income amount only:** Gross income is the total income received before taxes; the income you report on this application should not reflect the amount you receive after paying for taxes, insurance premiums, or any other deductions.
		+ **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.
	* If no income is receive write “0” or leave blank. If you write “0” or leave any income fields blank, you are certifying (promising) that there is no income to report. Mark how often each type of income is received by using the boxes to the right of each field.
2. **total household size.**
	* Total household size should be a total of the number of children listed in Step 1 plus the total number of adults listed in Step 3.
	* It is very important to list all household members, as the size of your household affects your eligibility for free and reduced price meals.
3. **last four digits of your Social Security Number.**
	* The *adult* primary wage earner or another *adult* household member must provide the last four digits of his/her 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, check the box to the right labeled “Check if no SSN.”

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| **STEP 4: CONTACT INFORMATION AND ADULT SIGNATURE** |

**The print name and signature must be the same and the signer must be an adult listed in the household under Step 3.** 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 at the bottom of these instructions.

1. **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.
2. **Write Today’s Date.** In the space provided, write the date you are submitting the application in the box.
3. **Return application to your school registrar or admission clerk.** You may direct additional questions to Felecia Morris, SNS Director at **214-875-4104** or email fmorris@texanscan.org.