



# Free and Reduced-Price School Meal Applications

Webinar SY 2023-2024



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Education Specialist II  
ALSDE CNP School Programs



**BREAK for a PLATE**  
ALABAMA

# Webinar Link

- [CLICK HERE](#) for the WebEx recording



# **BREAK** *for a* **PLATE**

## **SCHOOLS**

### Learning Codes

3200 Program Management

3000 Administration

3110 Free/Reduced Price Meal Benefits

# Agenda

## Free and Reduced-Price School Meal Applications

1. Direct Certification
2. F/R applications
3. Eligibility Manual Overview
4. USDA Prototype Options
  - Paper Application
  - Web-based Application
5. Application Processing
6. Appeal Process
7. Recordkeeping
8. Independent Review
9. Training
10. Summer EBT

**Correction: The public release must be sent to local media outlets, the unemployment office, and large employers experiencing layoffs.**

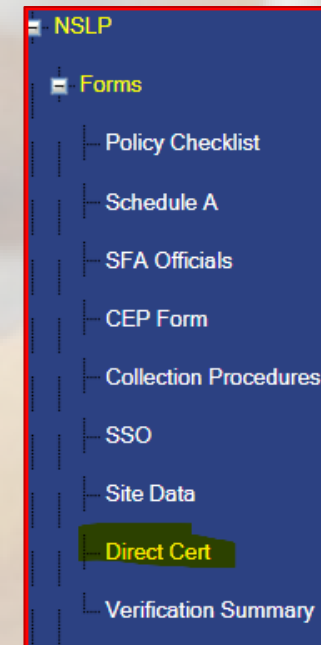
# Direct Certification (DC) Electronic Matching

Direct Certification allows LEAs to establish student eligibility for free meals using participant data from other means-tested programs (ex. SNAP, TANF, MEDICAID) eliminating the need for an application.

Automated Data Matching is the most common direct certification method used. ALSDE provides the Direct Cert list to public and charter schools by automatic upload through PowerSchool. Private Schools and RCCIs with day students must certify students by matching enrolled students to the direct cert list provided on the online application at the web address below

[cnp.alsde.edu](http://cnp.alsde.edu)

**NSLP >Forms >Direct Cert**



# Direct Certification - Medicaid - Electronic Matching

- ❖ Children may *ONLY* be directly certified based on an automated data matching process between the Alabama State Department of Education and the Alabama Medicaid Agency.

## **Extended Eligibility:**

Direct certifications of Medicaid Free or Reduced-Price determinations may be extended to other children in the same household.

Determination will be made at the state level and imported as part of the DC file nightly into PowerSchool.

# Direct Certification

## Other Source Categorically Eligible

A process conducted through an automated data matching or an exchange of information between appropriate State or local agencies and officials such as the LEAs homeless/foster/runaway coordinator.

DC may be conducted using lists of eligible children provided to the SA or LEA from appropriate officials. Letters from and contact with the officials may also be used as documentation for certification. [7 CFR 245.6(b)(2)]



Medicaid free and Medicaid reduced-price students are NOT considered categorically eligible since they must meet an income standard as a factor of eligibility.

**\*These students are only matched electronically.**

# Direct Certification

## Other Source Categorically Eligible

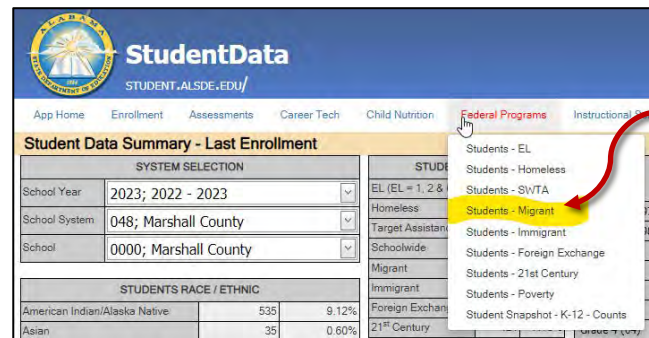
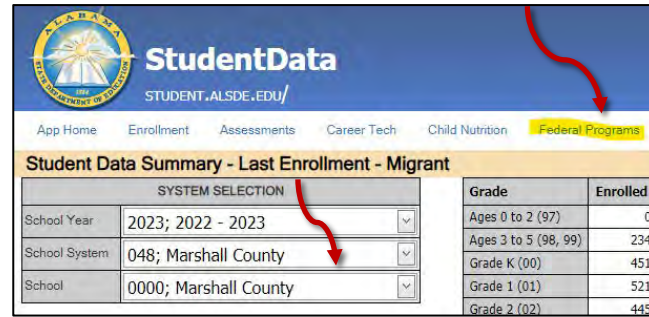
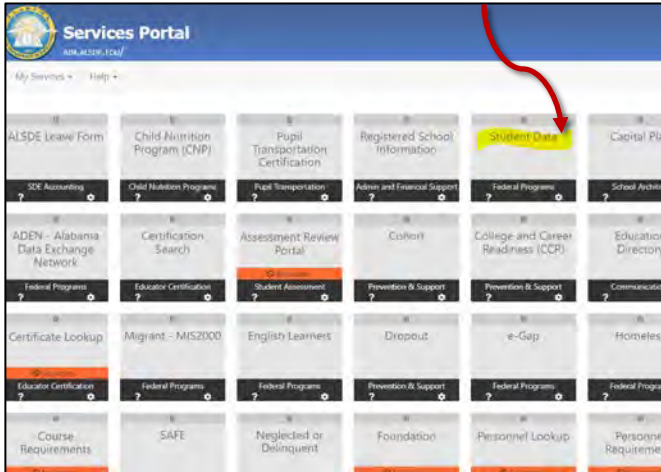
Page 18 Eligibility Manual

- Federal Head Start
- State or Indian Tribal Pre-K Programs
- Homeless
- Migrant (Migrant Education Program)
- Runaway
- Foster



# Direct Certification - Other Source Categorically Eligible Migrant (Migrant Education Program)

[My applications « \(AIM\) Services Portal \(alsde.edu\)](#)



The screenshot shows the 'All Student Data' table. A red arrow points to the 'Migrant' column, which is highlighted in yellow.

#	History	System	School	SSID	Last Name	First Name	Gender	Race	Grade	Federal Graduate	Federal Completer	Withdrawn	Dropout	Non-Traditional	Non-Traditional Type	Migrant	EL	Homeless
	History	048	0030	[REDACTED]	Guadalupe	F	White	10								<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	History	048	0030	[REDACTED]	Guillermo	M	White	10								<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	History	048	0030	[REDACTED]	Fabiola	F	White	12			<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	History	048	0030	[REDACTED]	Andres	M	American Indian/Alaska Native	09								<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

# Direct Certification PowerSchool

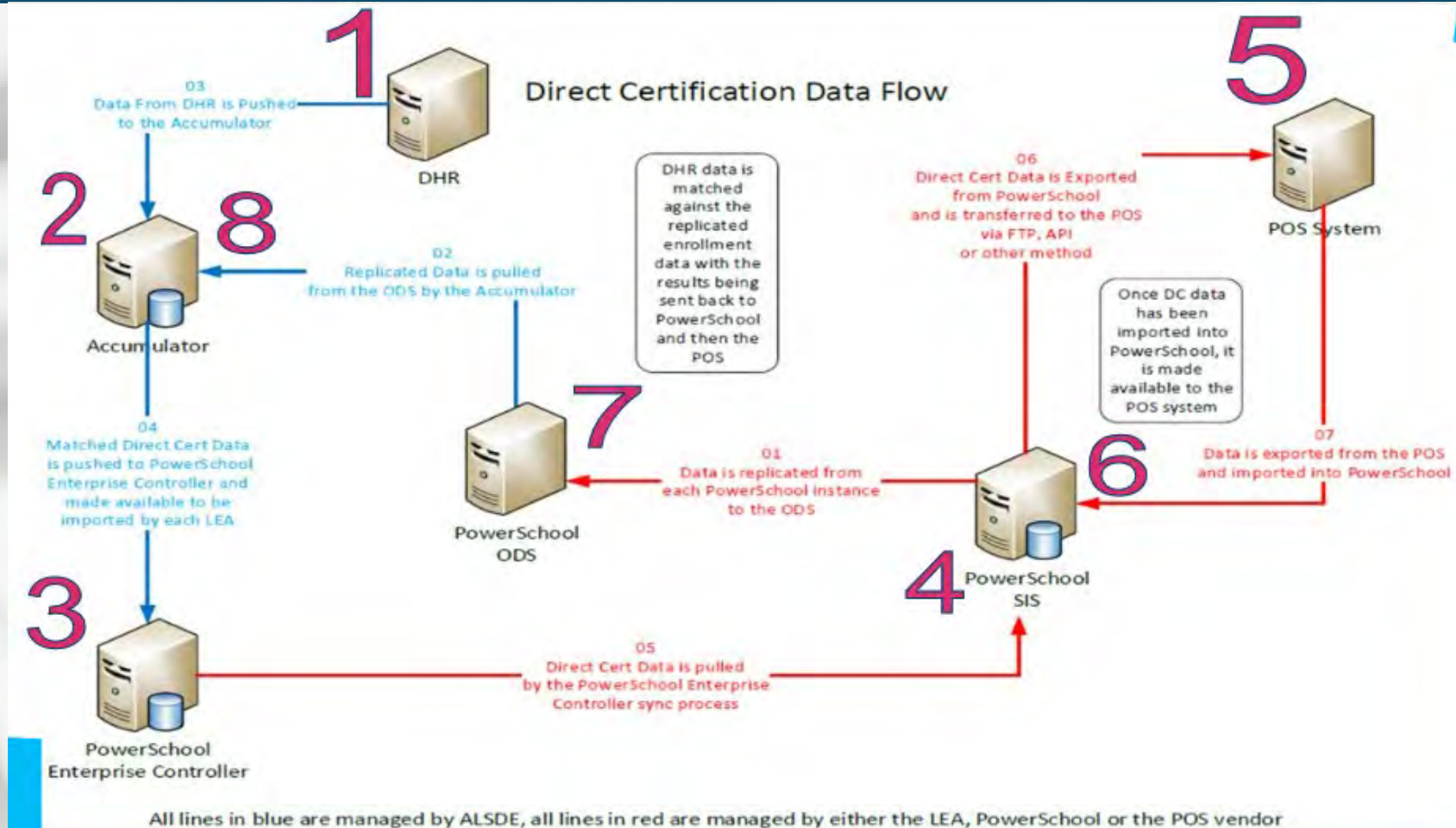
## DC STUDENTS - MATCHED VS UNMATCHED

- ALSDE RECEIVES NEW DC FILE ON JULY 1
- LEAS RECEIVES NEW DC FILE ON JULY 2 DURING THE NIGHTLY IMPORT
- LEAS SEE UPDATED STUDENT STATUS JULY 3 IN POWERSCHOOL

The screenshot shows the 'StudentData' website interface. The header includes the Alabama Department of Education logo and the URL 'STUDENT.ALSDE.EDU/'. The navigation menu includes 'App Home', 'Enrollment', 'Assessments', 'Career Tech', 'Child Nutrition' (highlighted), 'Federal Programs', and 'Instruction'. The main content area is titled 'Student Data Summary - Last Enrollment' and features a 'SYSTEM SELECTION' section with dropdown menus for 'School Year' (set to '2023; 2022 - 2023'), 'School System', and 'School'. A dropdown menu is open, showing 'DC Students - Matched' (highlighted) and 'DC Students - UnMatched'. Below this, a table displays columns for 'EL (EL = 1, 2 & 6)', 'Homeless', 'Target Assistance', 'Schoolwide', and 'Grade'.

# Direct Certification PowerSchool

## DATA FLOW FOR DC DATA



# Direct Certification PowerSchool

## Timing is Key!

ALSDE DC file imports into the state enterprise controller every morning around 10:00 AM CST

PowerSchool lunch sync occurs every hour from the state enterprise controller.

ALSDE nightly replication begins around 7:00 PM at night sending Lunch data back to AIM

When is your district syncing from your POS back into PowerSchool?

When are you moving data from PowerSchool into your POS?

Ensure the timing for data movement by your technology department aligns for appropriate data integrity

# Direct Certification PowerSchool

## What you should NOT be importing back into PowerSchool from your POS.

- Identified Population Field - determined by ALSDE DC file only.
- Any DC status - only students with a Paid, Reduced or Free status should be updated in PowerSchool by the POS vendor.

Any student that has a DC status with a blank identified population is an indication that your POS system is qualifying students as DC and writing them back to PowerSchool erroneously.

# Direct Certification PowerSchool

## Lunch Status

- DC lunch status will have identified population that is listed in the DC matched file in AIM.
- The LEAs should structure their export to their POS system to translate a parent declined to Full Paid
- Change History can be used to track any changes made to the status. Use to help track down issues

Adams, Wednesday Brooke 10 1967899024 OHS

Lunch status: Free-DC (FDC)

Application #

Date Submitted: 0/0/0

Date Responded: 0/0/0

Lunch ID: 0

Current balance: \$ 0.00

Alabama State Reporting Information

Identified Population

Identified Population: Direct Certification (SNAP) Case ID:

Parent Declined

Parent Declined Start Date: End Date:

Change History

Submit

# Notification of Eligibility through Direct Certification

## DC Letters

- ❖ The notification must explain that the child is eligible for free benefits without further application.
- ❖ The notification must clarify eligibility that free meal benefits extend to all school-aged children in the household.
- ❖ Must inform households of how to notify the LEA of any additional school-aged children in the household not listed on the notification.
- ❖ Must explain how the household can notify the LEA if the household does not wish to receive benefits for directly certified children.

# Duration of Eligibility and Carryover Eligibility

## **DURATION OF ELIGIBILITY**

Once an eligibility determination is made, a child's free, reduced or paid meal status remains in effect for the entire school year and up to 30 operating days into the following school year.

If the household reapplies or becomes eligible through direct certification the eligibility may change.

## **CARRYOVER ELIGIBILITY**

**(SFA's responsibility to establish grace period dates in POS)**

The child's eligibility free, reduced or paid status from the previous school year is carried into the current school year for up to 30 operating days.



# 30-Day Carryover Benefits Prior to Processing Applications

- ❖ Children with approved free or reduced price meal application on file from the previous year; Children directly certified for free or reduced meal benefits in the previous school year;
- ❖ Children who are newly enrolled in the LEA, but who reside in a household where another child (e.g., a sibling) has an approved application on file or was approved through direct certification with an Assistance Program in the previous year;
- ❖ Children determined Other Source Categorically Eligible for free benefits in the previous school year; and
- ❖ Children in kindergarten who were enrolled in Head Start under the jurisdiction of the same LEA during the previous school year.

# NO Application after 30-Day Carryover

- ❖ If no new application is submitted and eligibility is not established through direct certification by the end of the 30-day carryover period, a child's eligibility for free or reduced-price meals expires, and the **LEA must discontinue benefits**.
- ❖ The household does not have a right to appeal a discontinuation of benefits due to the expiration of the carryover period because no eligibility determination was made during the current school year. (Eligibility Manual for Schools, page 54)

Please refer to page 54 Eligibility Manual.

# Benefits for Students Transferring to a New School

## **The 30-Day carryover applies to:**

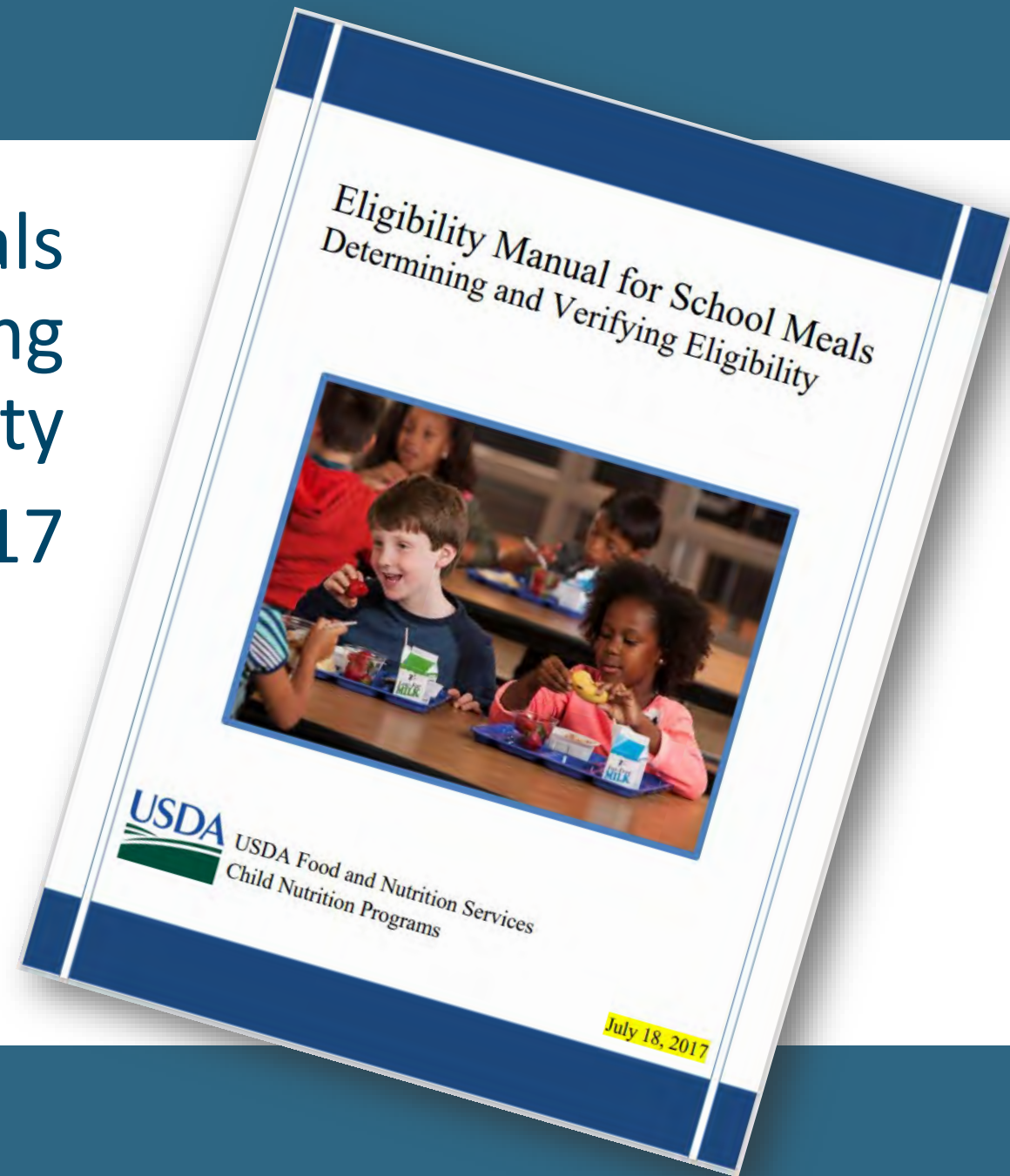
1. Transfers within an LEA
2. Transfers between LEAs
3. Transfers from a CEP or Provision 2 school to a non-CEP/Provision 2 school.

*This carryover ensures students do not experience a gap in school meal access.*

# Reference

## Eligibility Manual for School Meals Determining and Verifying Eligibility July 18, 2017

[Eligibility Manual for School Meals \(azureedge.us\)](http://azureedge.us)



SY24 will continue to use this version.

# USDA Prototype Free and Reduced Price School Meals Application Packet

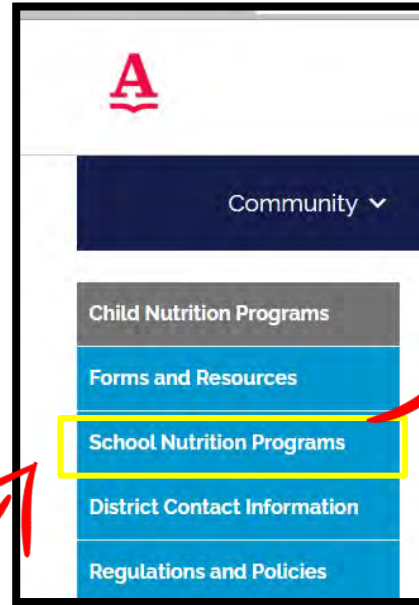
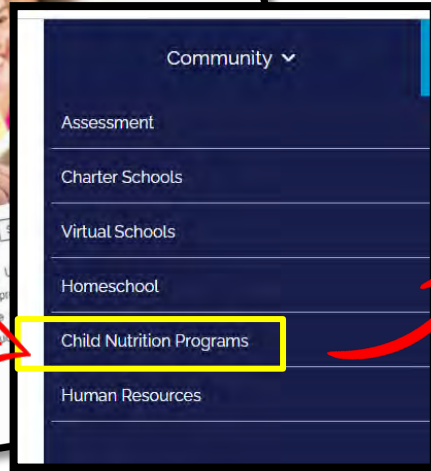
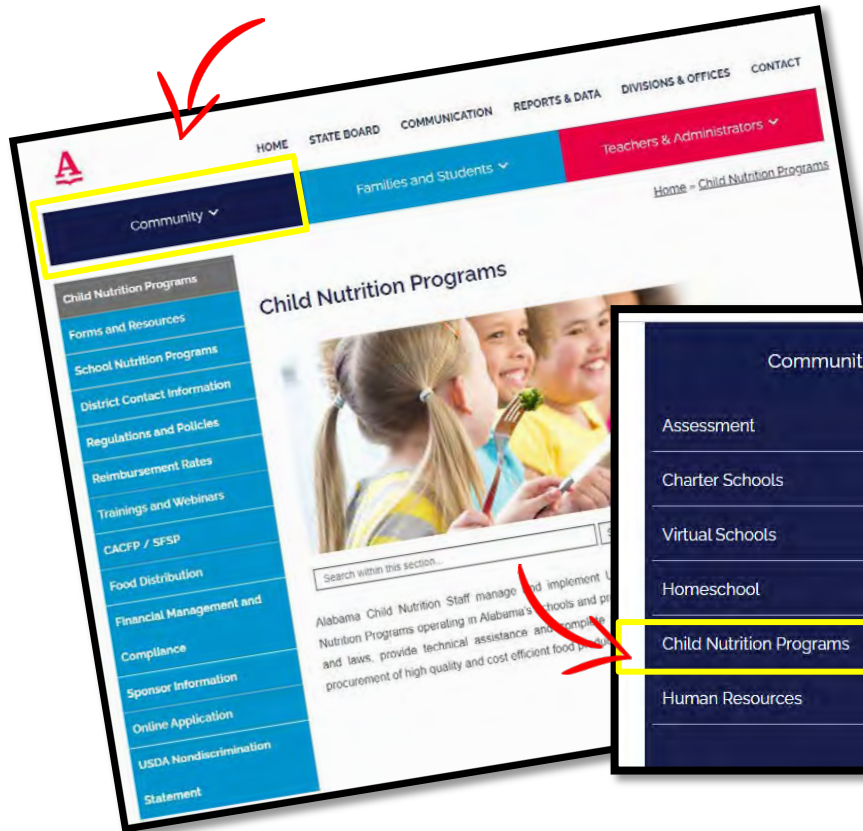
- Prototype Application for Free and Reduced-Price School Meals
- Prototype letter to households, *Frequently Asked Questions About Free and Reduced -Price School Meals*
- Prototype application instructions, *How to Apply for Free and Reduced-Price School Meals*
- Prototype information sharing authorizations; (**To ensure compliance use the letter posted on the ALSDE website.**)
  - Sharing Information with Medicaid/SCHIP
  - Sharing Information with Other Programs
- Prototype household benefit issuance notifications:
  - Notice to Direct Certification
  - Notice of Direct Certification Medicaid Reduced
  - *Notice to Households of Approval/Denial of Benefits*
- SY23-24 Income Eligibility Chart
- SY23-24 Public Release and Public Release Prototypes for CEP/Prov 2
- Prototype verification materials:
  - We Must Check Your Application
  - We Have Checked Your Application

NOTE: The USDA Non-Discrimination Statement is not required on FAQ if sent with all information in a packet. If documents are sent separately, the USDA Non-Discrimination Statement must be included on the Frequently Asked Questions for F/R Meal Applications and the How to Apply for Free and Reduced-Price School Meals.

# Prototype Application and Supporting Documents Link

The USDA Free and Reduced-Price Meals Prototype Application for SY 24 will be posted on the Alabama State Department of Education website.

ALSDE Home Page : Alabama Achieves → Community → Child Nutrition Programs → School Nutrition Programs → Then, Scroll down to Free and Reduced Forms.



FREE AND REDUCED FORMS	
Title	Description
<a href="#">SY 22-23 How To Apply For Free And Reduced Price School Meals</a>	SY 22-23 How To Apply For Free And Reduced Price School Meals
<a href="#">SY 22-23 Prototype Household Application for Free and Reduced Price School Meals</a>	SY 22-23 Prototype Household Application for Free and Reduced Price School Meals
<a href="#">SY 22-23 Income Eligibility Chart</a>	SY 22-23 Income Eligibility Chart
<a href="#">SY 22-23 Household Letters</a>	SY 22-23 Income Eligibility Chart
<a href="#">SY22-23 Public Release</a>	SY22-23 Public Release
<a href="#">SY22-23 Free and Reduced Price School Meals information</a>	SY22-23 Free and Reduced Price School Meals information
<a href="#">School Meals – Translated Applications</a>	School Meals – Translated Applications

# USDA Prototype Options

## Paper or Scannable:

- The prototype may be used by State and local agencies as an example when designing a new application packet.
- Local LEA's will need to modify prototype application to be district specific

## Web-Based:

- The electronic prototype application is intended to be a model for how State and local program operators (or their designated vendors) may develop an effective and fully compliant electronic/online application for school meal benefits.
- USDA offers both the design and code as open-source publications, structured to adapt and integrate with appropriate data management systems maintained at the state and/or local level. This open-source code offered by USDA at no cost.

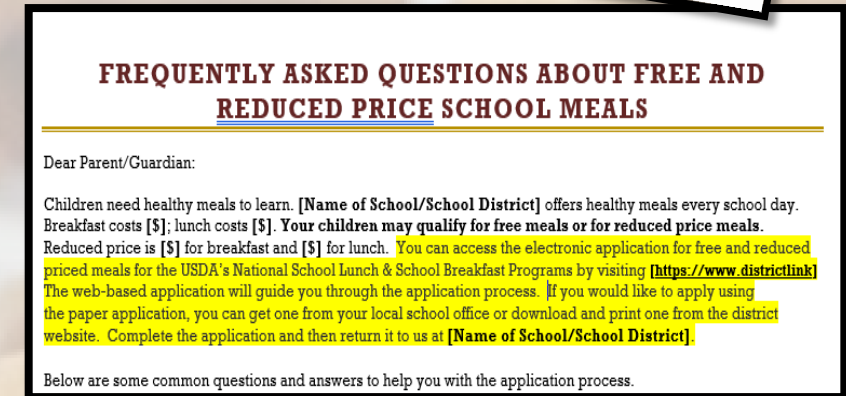
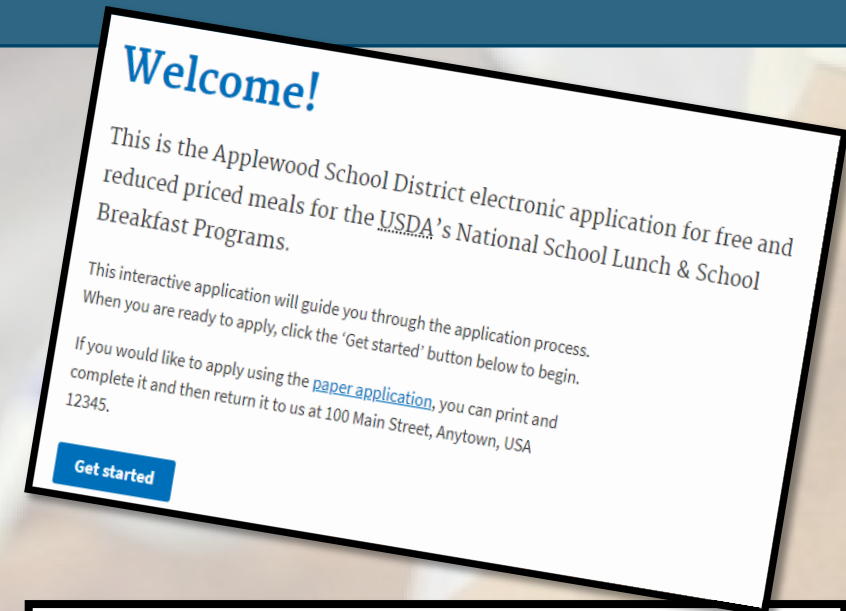
State Approval  
Required  
for  
Customized  
Documents  
and  
Web-Based  
Applications

- ❖ Customized Household Application for Free and Reduced-Price School Meals
- ❖ Customized Letters for Application and Verification
- ❖ Web-based Application Link
- ❖ **The deadline for submitting these documents is June 23.**



# USDA Prototype Web-Based Application Requirements

- Frequently Asked Questions About Free and Reduced-Price School Meals – Letter to Household
- For a web-based application, a paper copy should be available
- The letter to the household, must inform parents how to access the paper application.



**USDA Prototype Web-Based Application Source Code**

<https://www.fns.usda.gov/apps/school-meals/web-based-prototype/docs/index.html#/welcome>

# Web-Based/Online Applications

The LEA is ultimately responsible for determining the eligibility for free or reduced-price meals, not the computer system.

The LEA must ensure the computer system meets all requirements and performs all functions with a high degree of accuracy, as outlined in the eligibility manual. (page 72)

## ❖ Original date of approval

- Household size
- Household income
- Updates the status of the application to account for transfers, withdrawals, terminations and any other changes.

# Web-Based/Online Applications

- ❖ The determining official should sample a batch of applications to confirm that the software captures the required information.
- ❖ ALSDE recommends a batch of 5 applications. If an error is found, include documentation from the software company that the error has been corrected and confirm 5 additional applications.
- ❖ For documentation, the determining official may sign or initial the sample batch. Indicate name, title, and date.

# USDA Prototype Application Paper and Web-Based

**Prototype Household Application for Free and Reduced Price School Meals**  
 Complete one application per household. Please use a pen (not a pencil).

**APPLY ONLINE:**  
**RETURN TO (School/District Name):**  
**ADDRESS:**

**STEP 1 List ALL children, infants, and students up to and including grade 12.** Attach another sheet of paper if you need space for more names.  
 List ALL children in the household. Do not forget to list infants, children attending other schools, children not in school, and children not applying for benefits. This includes children not related to you in your household.

Child's First Name	MI	Child's Last Name	Grade	Foster Child	Migrant	Runaway	Homeless
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<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

If you checked any of these boxes, please refer to the Application Instruction's Step 1: Part C & Part D.

**STEP 2 Do any household members (including you) participate in SNAP, TANF, or FDIPIR?**  
 Go to STEP 3.  YES  NO Write case number here and proceed to STEP 4. **CASE NUMBER (NOT EBT NUMBER):** \_\_\_\_\_

**STEP 3 List ALL household members and income for each member (before taxes and deductions), even if not related, including you.**  
 List all Adult Household Members (Anyone who is living with you and shares income and expenses, even if they do not receive income. For each Household Member listed, if they receive income, report total gross income (before taxes and deductions) for each source in whole dollars (no cents) only. 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)	Earnings from Work	How often received?					Public Assistance, Child Support, Alimony	How often received?	Pensions, Retirement, Social Security, SSI, VA Benefits, All Other Income	How often received?					
		Weekly	Every 2 Weeks	2x Month	Monthly	Annual				Weekly	Every 2 Weeks	2x Month	Monthly		
	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Total Household Members (Children and Adults) \_\_\_\_\_ Last Four Numbers of Social Security Number of Primary Wage Earner or other Adult Household Member (if Applicable) \_\_\_\_\_

**B. Child Income**  
 Sometimes children in the household earn or receive income. Include the TOTAL income (before taxes and deductions) received by ALL children listed in STEP 1 here.  
 Child income \$ \_\_\_\_\_

**STEP 4 Contact information and adult signature.** RETURN COMPLETED FORM TO YOUR CHILD'S SCHOOL:  
 "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 (confirm) 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."

Print Name of Adult Signing the Form \_\_\_\_\_  
 Mailing Address (if available) \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Signature of Adult \_\_\_\_\_  
 Today's Date \_\_\_\_\_  
 Phone (optional) \_\_\_\_\_ Email (optional) \_\_\_\_\_

Insert school address here \_\_\_\_\_

Please see application's back for list of income sources.

- The highlighted field on the top right has space for the online line application address, school/district name and address.
- Additionally, a field has been added to Step 4 in the application instructions where program operators should include the mailing address where households may send completed applications.

# Frequently Asked Questions About F/R School Meals

Only change the **[bold bracketed fields]** or **highlighted** sections with state/district/facility specific information.

## **Be sure to:**

- Identify appropriate contacts (director, superintendent, homeless liaison, etc.)
- Include appropriate phone numbers and addresses.
- Font size must be legible.

## **The letters may be distributed by:**

- US Postal Service
- E-mailed to the parent or guardian, or
- Information packets provided to students.

# Common Mistake

## FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED PRICE SCHOOL MEALS

5. 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 [\[name, address, phone number, e-mail\]](#) if you have any questions about the online application.

If you select YES - The FAQs must explain that the option to submit a paper application is still available and must indicate how the household may obtain and submit a paper application.

### FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED PRICE SCHOOL MEALS

Dear Parent/Guardian:

Children need healthy meals to learn. Free and reduced price school meals are available to eligible children.

5. 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 [\[name, address, phone number, e-mail\]](#) 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. If you do not send in a new application unless the school told you that your child is eligible for the new school year, 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: [\[name, address, phone number, e-mail\]](#).

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 \$800, 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 mean to do so.

14. 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.

15. 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 [\[name, address, phone number, e-mail\]](#) to receive a second application.

16. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for [\[State SNAP\]](#) or other assistance benefits, contact your local assistance office or call [\[State hotline number\]](#).

If you have other questions or need help, call [\[phone number\]](#).  
Sincerely,  
[\[signature\]](#)

## FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED-PRICE SCHOOL MEALS continued

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 [date]. 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.

### FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED PRICE SCHOOL MEALS

Dear Parent/Guardian:

Children need healthy meals to learn. [Name of School/School District] offers healthy meals every school day. Breakfast costs \$5; lunch costs \$5. Your children may qualify for free meals or for reduced price meals. Reduced price is \$5 for breakfast and \$5 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 [State SNAP], [the Food Distribution Program on Indian Reservations (FDPIR)] or [State TANF], are eligible for free 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.

Household size	FEDERAL ELIGIBILITY INCOME CHART For School Year		
	Yearly	Monthly	Weekly
1			
2			
3			
4			
5			
6			
7			
8			
Each additional person:			

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 or e-mail [school, homeless liaison or migrant coordinator].

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: [name, address, phone number].

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 [name, address, phone number, e-mail] immediately.

8. 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 [name, address, phone number, e-mail] 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. 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: [name, address, phone number, e-mail]. household members do not have to be U.S. citizens to apply for free or reduced price meals.

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 \$600, 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. 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.

15. 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 [name, address, phone number, e-mail] to receive a second application.

16. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for [State SNAP] or other assistance benefits, contact your local assistance office or call [State hotline number].

If you have other questions or need help, call [phone number].  
Sincerely,  
[signature]

# How to Apply for Free and Reduced-Price School Meals

## How To Apply for Free and Reduced Price School Meals

Please use these instructions to help you fill out the application for free and reduced price school meals. You only need to submit one application per household, **even if your children attend more than one school in the** [Insert School District].

The application must be filled out completely to determine the eligibility of your child(ren) 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 [Insert school/school district contact here; phone and email preferred].

**Please use a pen (not a pencil) when filling out the application and do your best to print clearly.**

### Step 1: List ALL children, infants, and students up to and including grade 12

Tell us how many infants/toddlers, children not in school, and elementary/middle/high 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 formal foster arrangement through a court or state/local agency, or qualify as homeless, migrant, or runaway youth;
- Students attending (regardless of age) [school/school system here].

**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 (or a second application if completing electronically) with all required information for the additional children. This also applies to adults in Step 3. "MI" is short for middle initial. Print the first letter of each child's middle name in the box.

**B) Is the child a student?** If "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. Note: Adopted children are not considered foster children. A foster child is a minor child who has been taken into state custody and placed with a state-licensed adult, who cares for the child in place of their parent or guardian.

**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. Homeless, Migrant, Runaway status must be confirmed with the appropriate program staff. If the school district cannot confirm your student's homeless, migrant, or runaway status, then the school district will contact you to complete an income-based application. You may choose to provide income information now in order to prevent the school district from potentially needing to contact you later.



# Information Letters to Households

- The information letter (FAQs) **must** be sent to households before children begin attending school. The letters may be distributed by the postal service, e-mailed to the parent or guardian, or included in information packets provided to students on or before the first day of school.
  - **SFAs using web-based applications are required to send only the FAQs. Include NDS on FAQs if it is the only document being sent to inform households of program availability.**
- Direct Certification Letter – must be sent to households of students directly certified through data matching from state agencies.

# Information Letters to Households

## Options:

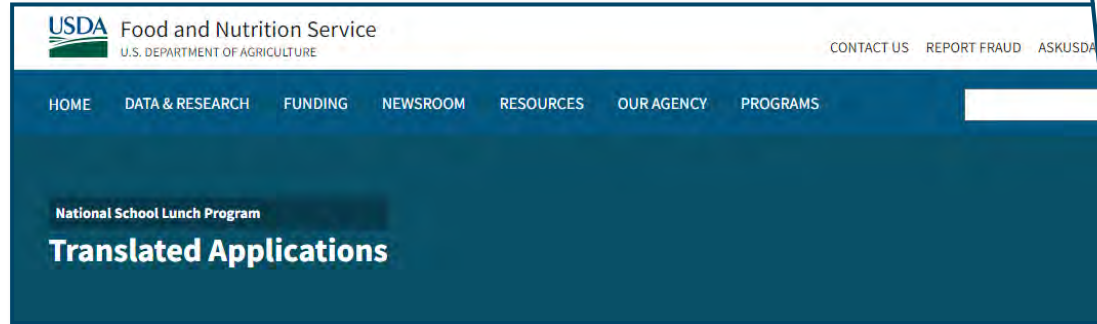
- Web based – information letter (FAQs) with the link to the online application
- Hard copy application or email the following:
  - Frequently Asked Questions About Free and Reduced-Price School Meals (FAQs), and
  - How to Apply for Free and Reduced-Price School Meals must be provided to parents/guardians together.
  - The Prototype Application for Free and Reduced-Price School Meals,

LEAs cannot require a household to complete an application for benefits.

# Overt Identification

- ❖ Any action that may result in a child being recognized as eligible to receive free or reduced-price school meals.
- ❖ LEAs and SFAs must assure that a child's eligibility status is not disclosed at any point in the process of providing free or reduced-price meals or free milk. (This includes the application and notification process.)

# Family Friendly Application Translations



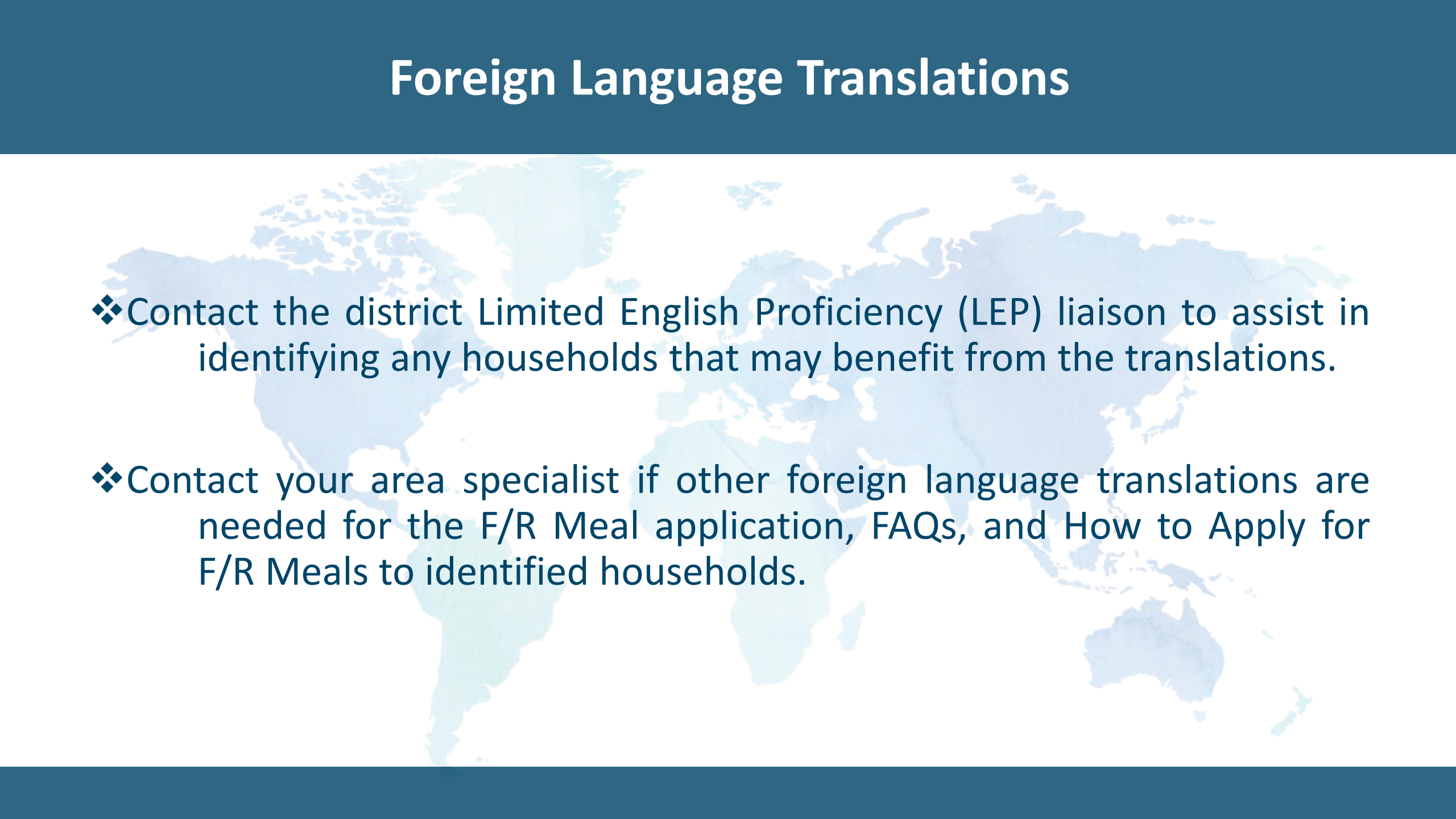
Translated applications are available in 34 languages and intended to be used directly by families. The application package has been limited to include only the initial information that families need under the “Resources for Households” heading. The additional prototype household letters are found under the “Resources for State and Local Agencies”. All items are located within the link below.

The form is titled "Modelo de solicitud de comidas escolares sin costo y a precio reducido para hogares". It includes the following sections and instructions:

- PRESENTA SU SOLICITUD EN LÍNEA: DEVUÉLVALA A (nombre de la escuela o del distrito): DIRECCIÓN:** (Present your application online: return it to (school or district name): address)
- PASO 1** Enumere a **TODOS** los niño/as, bebés y estudiantes de hasta 12º grado. Adjunte otra hoja si necesita espacio para más nombres. (List **ALL** children, babies, and students up to 12th grade. Attach another page if you need space for more names.)
- PASO 2** ¿Algún miembro del hogar (incluido usted) participa en el Programa de Asistencia Nutricional Suplementaria (SNAP, por sus siglas en inglés), el Programa de Asistencia Temporal para Familias Necesitadas (TANF, por sus siglas en inglés), o el Programa de Distribución de Alimentos en las Reservas Indígenas (PDPRI, por sus siglas en inglés)? (Does any household member (including you) participate in the Supplemental Nutrition Assistance Program (SNAP, in English), the Temporary Assistance for Needy Families (TANF, in English), or the Food Distribution Program on Indian Reservations (PDPRI, in English)?)
- PASO 3** Enumere a **TODOS** los miembros del hogar y los ingresos de cada uno de ellos (antes de impuestos y deducciones). (List **ALL** household members and the income of each of them (before taxes and deductions).)
- A. Todos los miembros adultos del hogar (cualquier persona, aunque no sea pariente, que viva con usted y comparta ingresos y gastos, incluyendo usted mismo).** Enumere a todos los miembros adultos del hogar que no se hayan mencionado en el PASO 1 (incluido usted), aunque no reciban ingresos. Para cada miembro del hogar que se haya enumerado, si recibe ingresos, indique los ingresos brutos totales (antes de impuestos y deducciones) de cada fuente únicamente en cantidades redondeadas (sin centavos). Si no recibe ingresos de ninguna fuente, escriba "0". Si escribe "0" o deja algún campo en blanco, certifica (garantiza) que no hay ingresos que declarar. (List **ALL** adult household members (any person, even if not a relative, who lives with you and shares income and expenses, including you). List all adult household members not mentioned in Step 1 (including you), even if they do not receive income. For each household member listed, if they receive income, indicate their total gross income (before taxes and deductions) from each source only in rounded amounts (no cents). If they do not receive income from any source, write "0". If you write "0" or leave any field blank, you certify (guarantee) that there are no income sources to declare.)
- B. Ingresos de los niño/as** (Income of children)
- PASO 4** Información de contacto y firma del adulto. DEVUELVA EL FORMULARIO COMPLETADO A LA ESCUELA DE SU NIÑO/A. (Contact and adult signature information. RETURN THE COMPLETED FORM TO THE SCHOOL OF YOUR CHILD.)

<http://www.fns.usda.gov/school-meals/applying-free-and-reduced-price-school-meals>

# Foreign Language Translations

- 
- ❖ Contact the district Limited English Proficiency (LEP) liaison to assist in identifying any households that may benefit from the translations.
  - ❖ Contact your area specialist if other foreign language translations are needed for the F/R Meal application, FAQs, and How to Apply for F/R Meals to identified households.

# Processing F/R Meal Applications

- ❖ Applications with blank income fields are to be processed as complete.
- ❖ All areas of the application must be completed.
- ❖ Application must be considered complete if the racial/ethnic data collection questions are not answered.
- ❖ The last four digits of the Social Security Number must be included or “I do not have a Social Security Number” checked.

# Application → Processing Timeframe

Applications should be reviewed, and eligibility determination made within **10 operating days** of the receipt of the application.

Status is not retroactive.

- ❖ ***Flexibility in Determining Effective Date of Eligibility requires ALSDE approval.***

- ❖ ***SP11-2014***

Changes in status must be documented.



- ❖ An incomplete application is missing required information, contains inconsistent information or is unclear.
- ❖ The LEA should make reasonable efforts to contact the household to obtain or clarify required information.
- ❖ Any income field left blank is a positive indication of no income; therefore, paper applications with blank income fields are to be processed as complete.





The LEA has a regulatory obligation to verify “for cause” all approved applications that may be questionable.

The verification effort cannot delay the approval of the application.

If an application is complete and indicates that the child is eligible for free or reduced-price benefits, the application must be approved.

Questionable Applications ?



## Household Failure to Apply

**Local officials may complete an application for a student known to be eligible.**

Applications must include:

1. Household size and income based on best information available.
2. Source of information must be noted on application.

Eligibility is based on application information.

Household must be notified.

This option is for limited use.

# Hardship Cases

USDA has no provision for making exceptions based on unusual household circumstances.

# Notification of Eligibility or Denial

**Households must be notified, either in writing or verbally, of their child's eligibility status within 10 operating days of receipt of the application.**

Households **denied** benefits must be notified in writing and include:

1. The reason for denial of benefits.
2. The right to appeal.
3. Instructions on how to appeal.
4. A statement that households may reapply for benefits at anytime during the school year with income documentation.

*USDA Prototype: Notice to Households of Approval/Denial of Benefits*

# Appeal Process

Household may  
appeal determination.

District must follow  
hearing procedures.



# Decline of Benefits by Parent or Guardians

Households notified of their children's eligibility must contact the LEA or school if the household chooses to decline the free meal benefits.

- ❖ Parents/Guardians may decline benefits or request reduced benefits.
- ❖ Document by source, initial, and date.
- ❖ Meals are claimed at the status the parent's/guardian's request.



*Free and Reduced-Priced Meals*



# Recordkeeping

**Follow the most restrictive record retention policy between USDA, Alabama, and your local district.**

- Federal - three years plus the current (4 years total)
- State - current plus two years following the closure of your last Administrative Review.
  
- ❖ **Approved Applications:** date approved, level of benefits, signature or initials of reviewing official.
- ❖ **Denied Applications:** reason for denial, date of denial, date notice sent, signature of reviewing official.
- ❖ **Dates of transfers, withdrawals and changes in eligibility must be maintained.**

# Filing and Maintaining Applications

❖ It is recommended that applications are filed in the district central office.

❖ Applications must be readily retrievable.

❖ Six categories of applications:

- Free
- Reduced
- Denied
- Withdrawn
- Temporary
- Verification

FREE &  
REDUCED  
LUNCH  
APPLICATION



❖ Document changes on applications.

**Modelo de solicitud de comidas escolares sin costo y a precio reducido para hogares**  
Complete una solicitud por hogar. Use bolígrafo (no use lápiz).

**PRESENTE SU SOLICITUD EN LÍNEA:  
DEVUELVALA A (nombre de la escuela o del distrito):**

**Modelo de solicitud de comidas escolares sin costo y a precio reducido para hogares**  
Complete una solicitud por hogar. Use bolígrafo (no use lápiz).

**PRESENTE SU SOLICITUD EN LÍNEA:  
DEVUELVALA A (nombre de la escuela o del distrito):**

**DIRECCIÓN:**

**Modelo de solicitud de comidas escolares sin costo y a precio reducido para hogares**  
Complete una solicitud por hogar. Use bolígrafo (no use lápiz).

**PASO 1** Enumere a TODOS los niño/as, bebés y estudiantes de hasta 12<sup>o</sup> grado. Adjunte otra hoja si necesita espacio para más nombres. Esta incluye a los niño/as que no tienen parentesco con usted y viven en su hogar. Enumere a TODOS los niño/as del hogar. No olvide mencionar a los bebés, los niño/as que asisten a otras escuelas, los niño/as que no asisten a la escuela y los niño/as que no solicitan beneficios. Este incluye a los niño/as que no tienen parentesco con usted y viven en su hogar.

El primer nombre del niño/a	M	Apellido(s) del niño/a	Grado	Foster Child	Migrante	Hoyá del hogar	Sin hogar
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PASO 2** ¿Algún miembro del hogar (incluido usted) participa en el Programa de Asistencia Nutricional Suplementaria (SNAP, por sus siglas en inglés), el Programa de Asistencia Temporal para Familias Necesitadas (TANF, por sus siglas en inglés), o el Programa de Distribución de Alimentos en las Reservas Indígenas (FDPRI, por sus siglas en inglés)?

NO → Continúe al PASO 3.  SÍ → Escriba el número de caso aquí y continúe al PASO 4.

**NÚMERO DE CASO (NO EL NÚMERO DE TRANSFERENCIA ELECTRÓNICA DE BENEFICIOS (EBT, por sus siglas en inglés):** \_\_\_\_\_

**PASO 3** Enumere a TODOS los miembros del hogar y los ingresos de cada uno de ellos (antes de impuestos y deducciones)

**A. Todos los miembros adultos del hogar (cualquier persona, aunque no sea pariente, que viva con usted y comparta ingresos y gastos, incluyendo usted mismo).** Enumere a todos los miembros adultos del hogar que no se hayan mencionado en el PASO 1 (incluido usted), aunque no reclamen ingresos. Para cada miembro del hogar que se haya enumerado, si recibe ingresos, indique los ingresos brutos totales (antes de impuestos y deducciones) de cada fuente únicamente en cantidades redondeadas (sin centavos). Si no recibe ingresos de ninguna fuente, escriba "0". Si escribe "0" o deja algún campo en blanco, certifica (garantiza) que no hay ingresos que declarar.

Nombre del miembro adulto del hogar (nombre y apellido)	Ingreso del hogar	¿Con qué frecuencia se reciben? (Marque con un círculo)	¿Con qué frecuencia se reciben? (Marque con un círculo)	¿Con qué frecuencia se reciben? (Marque con un círculo)	¿Con qué frecuencia se reciben? (Marque con un círculo)	¿Con qué frecuencia se reciben? (Marque con un círculo)	¿Con qué frecuencia se reciben? (Marque con un círculo)
		Los días	Los meses	Los años	Los meses	Los días	Los meses
	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**B. Ingresos de los niño/as**  
A veces los niño/as del hogar obtienen o reciben ingresos. Incluya aquí los ingresos TOTALES (antes de impuestos y deducciones) recibidos por TODOS los niño/as que se hayan enumerado en el PASO 1.

**Cuatro últimos dígitos del Número de Seguro Social de la persona que tenga el salario principal u otro miembro adulto del hogar (si corresponde):** \_\_\_\_\_

**Ingresos de los niño/as:** \$ \_\_\_\_\_

**PASO 4** Información de contacto y firma del adulto. **DEVUELV EL FORMULARIO COMPLETADO A LA ESCUELA DE SU NIÑO/A.** Escriba aquí la dirección de la escuela.

“Certifico (garantizo) que toda la información que aparece en esta solicitud es verdadera y que se declararon todos los ingresos. Entiendo que esta información se proporciona en relación con la recepción de fondos federales y que los funcionarios de la escuela pueden verificar (confirmar) la información. Soy consciente de que si proporciono información falsa intencionalmente, mis niño/as pueden perder los beneficios de comidas y yo me podría procesar de acuerdo con las leyes estatales y federales aplicables.”

Nombre en letra de imprenta del adulto que firma el formulario \_\_\_\_\_ Fecha de hoy \_\_\_\_\_  
Ciudad \_\_\_\_\_ Estado \_\_\_\_\_ Código postal \_\_\_\_\_ Teléfono (opcional) \_\_\_\_\_ Correo electrónico (opcional) \_\_\_\_\_  
Dirección postal (si está disponible) \_\_\_\_\_

**Devuelva el formulario completado a la escuela de su niño/a.**



# Documenting Changes

When documenting changes on applications:

- ❖ Initial
- ❖ Date
- ❖ Include any important information
  - Who
  - What
  - When
  - Where
  - Why



# Disclosure of Confidential Information

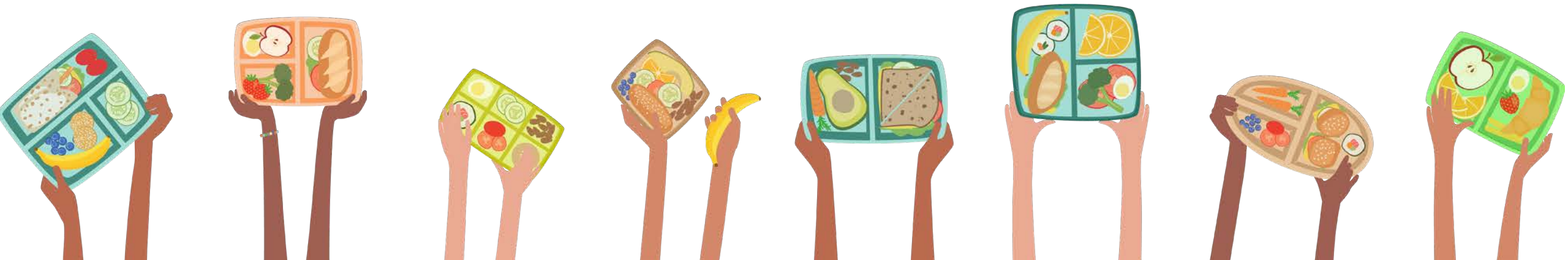
- ❖ The LEA must seek written consent from the parent or guardian who signed the application to use the information provided on the application for non-program purpose.
- ❖ Parental consent must be obtained each school year and consent forms cannot be extended from one school year to the next.
- ❖ Eligibility may be disclosed without consent to programs such as Federal Education Programs, state health or education programs; Federal, state or local means-tested nutrition programs.





# Summer-EBT Benefits

- New Summer -EBT goes into effect summer 2024
- Guidance is being developed by USDA
- SA will receive training once guidance is rolled out
- ALSDE will promptly forward guidance to SFAs



**1. Clarification - SFAs are required to distribute letters to the household to each student. Is it enough to have the letter posted to the school's web page and online application portal**

- To inform families about the availability of free and reduced-price meals or free milk, schools must distribute information letters to the households of children attending the school. [7 CFR 245.5(a)(1)]. The letters may be distributed by the postal service, e-mailed to the parent or guardian, or included in information packets provided to students.

**2. Is distribution of paper application packets on the first day of school approved?**

- Yes, distribution of a complete paper application packet (consisting of an application form, How-to-Apply instructions, and the letter to households/FAQs) is an allowable distribution method.
- SFAs (School Food Authority) that do not have a web-based F/R application, must provide a paper application packet to all enrolled students in one of the distribution methods highlighted in question #1.
- SFAs that have a State approved web-based F/R application, must send only the letter to household/FAQ letter to all households in one of the distribution methods highlighted in question #1. Because of the availability of the web-based application, a paper application packet does not have to be available for all enrolled students, but available upon request
  - The letter to household must include a statement explaining how to obtain a paper application if a household decides it can't or won't complete an application electronically.



### 3. Are districts required to send DC notification letters to students in CEP schools?

- No, For SFAs participating in CEP a notice of approval, as required by [7 CFR 245.6\(c\)\(6\)](#), would not be appropriate since individual student eligibility is not an issue.
- The correct protocol for informing the public about CEP is found in [SP 54-2016](#) “*Notification and Publication Requirements*” Question 3, which states “LEAs electing CEP should use their usual channels of communication (i.e., the required public announcement included at 7 CFR 245.5) to notify that school meals will be available at no cost to all enrolled students.
- LEAs may also consider including information about CEP when sending out “back-to-school” packets with student registration materials each fall, posting information about CEP on the district website, and/or sharing information about CEP in student handbooks.”

### 4. If all applications are processed online, should a copy of all processed applications be printed

- No, keep an electronic copy to have readily available.

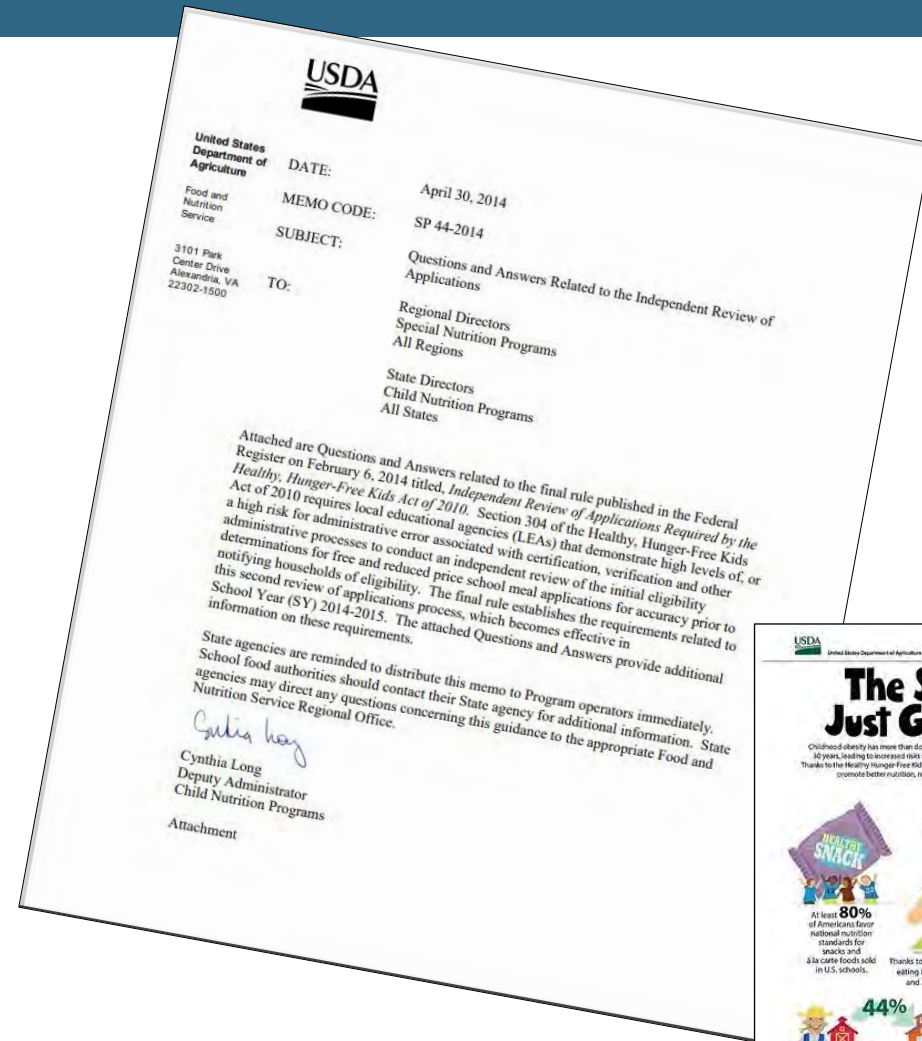
### 5. When will the DC file be exported to PowerSchool?

- The DC file will be exported to PowerSchool on July 1<sup>st</sup>. LEAs will receive the DC file on July 2<sup>nd</sup>.

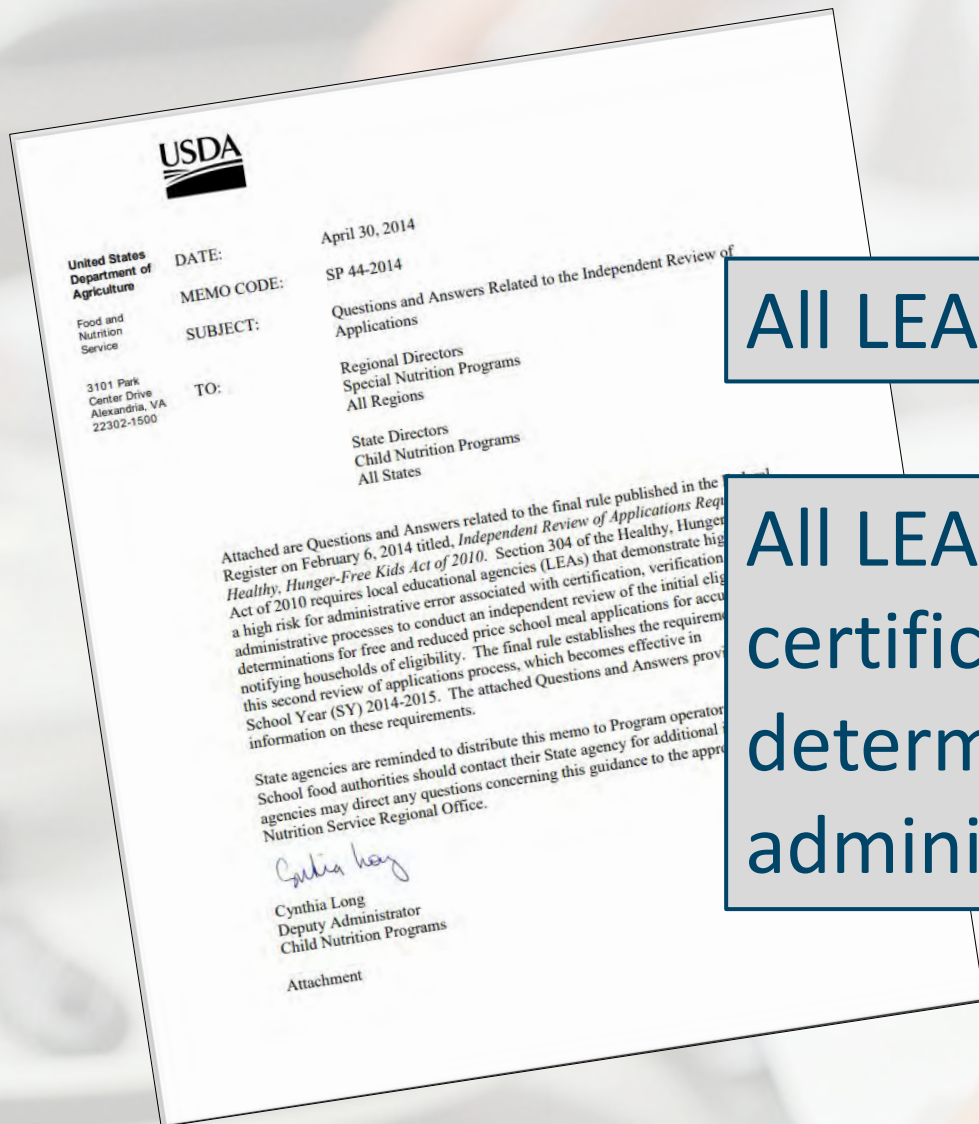


# Independent Review

Section 304 of the Healthy, Hunger-Free Kids Act of 2010 requires local educational agencies (LEAs) that demonstrate high levels of, or a high risk for administrative error associated with certification, verification and other administrative processes to **conduct an independent review** of the initial eligibility determinations for free and reduced-price school meal applications for accuracy prior to notifying households of eligibility.



# Independent Review Selection Criteria



All LEAs in their first year of operation of NSLP.

All LEAs with a 10% or more certification/benefit issuance error, as determined by the state agency during an administrative review.

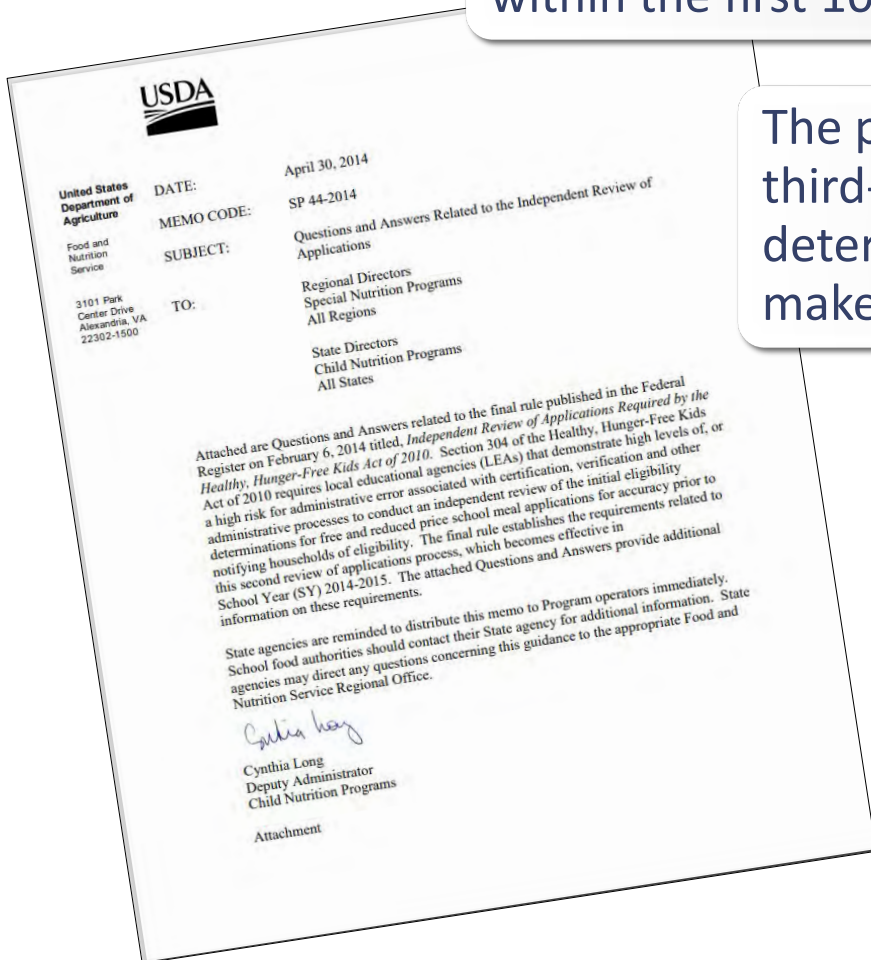
# Independent Review Process for SFAs

Conduct second review of applications as a re-evaluation of the initial determination. This review must be completed before the household is notified of eligibility and must not delay processing within the first 10 operating days of receipt.

The person completing Independent Review must be a third-party who was not involved in original eligibility determination. This individual must be trained on how to make application determinations.

If required to complete Independent Review, SFAs will complete this process annually unless otherwise determined by the Alabama State Department of Education (ALSDE) Child Nutrition Programs (CNP) staff.

Enter information into the online Verification Summary by the date determined and published yearly by ALSDE.





# Independent Review Process for SFAs cont'd

Confirming that the application was correctly approved based on current income guidelines and/or other categorical eligibility guidelines.

Ensure that:

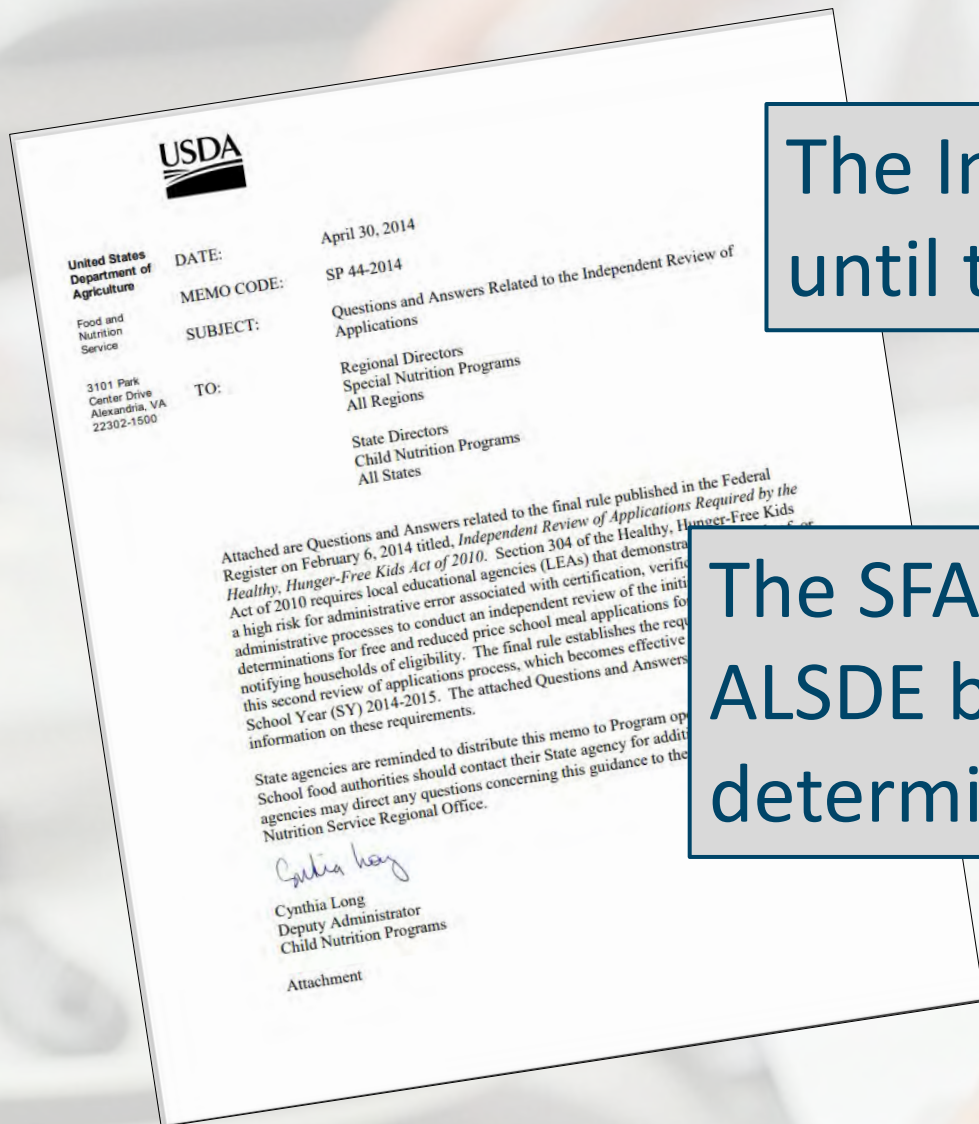
- ❖ The confirming official must validate the master list or roster and POS roster of students to ensure all records accurately state student's meal status.
- ❖ The application includes:
  1. Signature of an adult household member
  2. Last four digits of a social security number or indication of "none"
  3. Names of **all** household members including the student for whom application is made
  4. Income amount for each household member identified
  5. Income source
  6. Income frequency or categorical information, if applicable

# How long does the Independent Review requirement last?

The Independent Review is required each year until the next Administrative Review.

OR

The SFA may request an on-site review by ALSDE between Oct 1 and Nov 15 to determine if the error rate is below 10%.



# Don't Forget to Train



CNP Directors are responsible for training all staff members who process Free and Reduced-Price Meal Applications.

Remember when training your staff this year, encourage school secretaries and principals to update student addresses on a regular basis. We discovered through the Pandemic EBT process that many families did not have accurate contact information which delayed receipt of their PEBT cards.

**Prototype Household Application for Free and Reduced Price School Meals**

Complete one application per household. Please use a pen (not a pencil).

**APPLY ONLINE:**  
RETURN TO (School/District Name):  
ADDRESS:

**STEP 1** List ALL children, infants, and students up to and including grade 12. Attach another sheet of paper if you need space for more names.  
List ALL children in the household. Do not forget to list infants, children attending other schools, children not in school, and children not applying for benefits. This includes children not related to you in your household.

Child's First Name	MI	Child's Last Name	Grade	Foster Child	Migrant	Runaway	Homeless
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<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

If you checked any of these boxes, please refer to the Application Instruction's Step 1, Part C & Part D.

**STEP 2** Do any household members (including you) participate in: SNAP, TANF, or FDIPIR?  
 NO → Go to STEP 3.  YES → Write case number here and proceed to STEP 4. CASE NUMBER (NOT EBT NUMBER): Write only one case number in this space.

**STEP 3** List ALL household members and income for each member (before taxes and deductions)  
 A. All Adult Household Members (Anyone who is living with you and shares income and expenses, even if not related, including you).  
 List all Adult Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they receive income, report total gross income (before taxes and deductions) for each source in whole dollars (no cents) only. 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)	Earnings from Work	How often received?				Public Assistance, Child Support, Alimony	How often received?				Pensions, Retirement, Social Security, VA Benefits, All Other Income	How often received?			
		Weekly	Every 2 Weeks	1x Month	Monthly		Weekly	Every 2 Weeks	1x Month	Monthly		Weekly	Every 2 Weeks	1x Month	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"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Household Members (Children and Adults) Last Four Numbers of Social Security Number of Primary Wage Earner or other Adult Household Member (If Applicable) Check if no Social Security Number. Please see application's back for list of income sources.

**B. Child Income**  
 Sometimes children in the household earn or receive income. Include the TOTAL income (before taxes and deductions) received by ALL children listed in STEP 1 here.  
 Child Income: \$

**STEP 4** Contact information and adult signature. RETURN COMPLETED FORM TO YOUR CHILD'S SCHOOL: Insert school 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 (confirm) the information. I am aware that if I purposefully give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws.\*

Print Name of Adult Signing the Form:   
 Signature of Adult:   
 Today's Date:   
 Mailing Address (if available):  City:  State:  Zip:  Phone (optional):  Email (optional):

FREE & REDUCED LUNCH APPLICATION



# State Coordinator Contact Information

Department of Education  
Migrant Program Coordinator  
Contact: Sally Meek  
[sally.meek@alsde.edu](mailto:sally.meek@alsde.edu)  
334-694-4527

State Department of Education  
Homeless Program Coordinator  
Contact: LaDonna Rudolph  
[ladonna.rudolph@alsde.edu](mailto:ladonna.rudolph@alsde.edu)  
334-694-4534

Department of Human Resources  
Contact: Brandon Hardin  
334-242-1700



# USDA Non-Discrimination Statement

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: [USDA Program Discrimination Complaint Form](#) 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: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov).

This institution is an equal opportunity provider.

\*This language was added pursuant to the May 5, 2022, USDA memorandum. However, the inclusion and applicability of this language is currently under challenge 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.

ASK US



# Post Assessment

<https://forms.office.com/r/hw6ajWzRL5>

