

APPLICATION FOR THE FREE AND REDUCED LUNCH PROGRAM

AUTHORITY: The National School Lunch Act (42 USC 1751) as amended by Public Law 91-248 (1970); DoD Directive 1015.5. DoD Student Meal Program, and USAFE Instruction 36-401, Installation Commanders and School Liaison Officers. **PRINCIPLE PURPOSE:** To determine eligibility for free or reduced price meals under the National School Lunch Act and DoD Student Meal Program. **ROUTINE USE(S):** This form will be used solely for the principal purpose(s) described above. **DISCLOSURE:** The disclosure of the Social Security Number is voluntary. However it is required under the provision of the National School Lunch Act before your child may receive free or reduced lunch meals. **PRIVACY ACT STATEMENT**

Before completing this form please read instruction on reverse

FOR SCHOOL LAISON USE ONLY

SCHOOL YEAR 2012-2013	PROCESSED BY	DATE (YYYYMMDD)	TIME	QUALIFICATION CATEGORY INELIGIBLE <input type="checkbox"/> FREE <input type="checkbox"/> REDUCED <input type="checkbox"/> INELIGIBLE
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I. FAMILY INFORMATION

1. SPONSOR'S NAME (Last, First, Middle Initial)		2. SPONSOR'S SSN (Last 4 numbers)		3. RANK/BRANCH		4. ORGANIZATION			
5. DUTY PHONE		6. PSC or CMR 76		7. BOX		8. APO AP 96319-_____		9. HOME PHONE	
10. SPOUSE'S NAME (Last, First, Middle Initial)			11. SPOUSE'S SSN (Last 4 numbers)		12. DEROS		13. E-MAIL ADDRESS (Work or Home)		

14. TOTAL MEMBERS OF HOUSEHOLD (Identify all children and other household members, including sponsor, regardless of age)

NAME (Last, First) (a)	AGE (b)	GRADE (c)	SCHOOL (d)

II. FAMILY'S TOTAL GROSS MONTHLY INCOME (before taxes)

15. NOTE: If a spouse is deployed in support of the Global War on Terrorism only the portion of the spouse's income that is made available to the family is counted for eligibility purposes. State on the Leave and Earnings Statement (LES) what amount of the deployed member's income is being retained by the member and the gross amount that is made available for the family's support.

TYPE OF INCOME (a)	AMOUNT (b)	TYPE OF INCOME (a)	AMOUNT (b)
(1) BASE PAY (Annual)		(8) ALL OTHER INCOME (Specify) (Annual)	
(2) BASIC ALLOWANCE FOR SUBSISTENCE (BAS) - Refer to LES (Annual)		(9) MILITARY CLOTHING ALLOWANCE (Annual)	
(3) SUPPORT/ALIMONY (Annual)			
(4) RETIREMENT/PENSION (Annual)			
(5) SPECIAL DUTY PAY (Annual)			
(6) SPOUSE INCOME (Annual)			

c. TOTAL INCOME (Annual)

III. CERTIFICATION STATEMENT (Read and initial each statement and sign below)

a. STATEMENT		b. INITIALS
16.	This application is made in connection with the receipt of federal funds. Deliberate misrepresentation of information may subject the applicant to prosecution under applicable Federal Statutes (UCMJ) or other regulations.	
17.	Meals covered in the free/reduced lunch program are for one (1) USDA approved tray lunch per day (excludes lunch plus and double lunch)	
18.	A la carte food items are not covered under the free/reduced lunch program and will incur a charge to the student's account at the posted price.	
19.	I understand that eligibility is only valid for the current school year and that another application must be submitted to determine eligibility for each new School Year.	
20.	I certify that all of the above information is true and correct to the best of my knowledge. I have provided a copy of my LES as proof to the fact regarding rank, pay and years in service.	

21. SIGNATURE OF SPONSOR/SPOUSE	22. DATE (YYYYMMDD)
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FOR OFFICIAL USE ONLY (When Filled In)

GENERAL INFORMATION

Income Eligibility Guidelines,

Free meals are provided to children from households where the family size and income level are at or below 130% of the poverty guidelines. Reduced-price meals are provided to children from households where the size and income level exceeds 130% up to 185% of the poverty guidelines. We use the Federal Income Poverty Guidelines described by the Secretary of Agriculture for Alaska. More Information is available at <http://www.fns.usda.gov/cnd>.

Instructions

Complete the Application for Free and Reduced Lunch Program as Instructed In each section. Household members include those living in your Misawa residence. Individuals for whom you provide financial support, such as children in the physical custody of others, parents, or in-laws are not considered household members. Dependent children who are away at college or boarding school are counted as household members. Read, initial and sign the application form at the bottom of the page. Attach a copy of your most recent Leave and Earnings Statement. If other family members are employed, also provide a copy of their pay stubs or wage statements as well. Place the completed application in the drop box along the left wall as you enter the Customer Service Area of the BX.

APPLICATIONS WITHOUT a current (July 2012) WAGE STATEMENTS ATTACHED OR WITH BLOCKS NOT FILLED IN ARE INCOMPLETE.

FEDERAL GUIDANCE PROHIBITS PROCESSING OF INCOMPLETE APPLICATIONS.

A written letter of eligibility/ineligibility is sent directly to applicants. If your family is determined eligible, take the notice letter to the Customer Service Area at the BX to ensure their records also show your child was approved.

If you are denied benefits based on income and household size and believe you have unique circumstances that warrant consideration, call 226-2760 to discuss the matter with the SSgt Ivan Garcia. If you are still dissatisfied, an appeal can also be requested by calling 226-3540 Mr. Steve M. Zuniga, MSG/DD.

Definition of Income

Income as the term is used to determine eligibility means income before any deductions such as income taxes, social security taxes, insurance premiums, charitable contributions, and bonds.

<p>EARNINGS FOR WORK Wages/salaries/tips/commissions or fees Military Base Pay Military special and Incentive pay Civilian special and incentive pay or differential Net income from self-owned business Unemployment Compensation</p>	<p>MILITARY ALLOWANCES Basic Allowance for Subsistence (BAS) Post differential or station allowance Temporary housing allowance Family Subsistence Supplemental (FSSA) Clothing Allowance</p>
<p>OTHER CASH INCOME Regular contributions from persons not residing in the household Dividends or interest on savings, bonds or income from estates or trust Net rental income or net royalties Cash withdrawal from savings, investments, trust accounts or other resources</p>	<p>PENSIONS/ RETIREMENT/ SOCIAL SECURITY Government: civilian/ military retirement Private pensions/annuities Veteran Payments (excluding educational) Social Security/ Supplemental Security Income (SSI)</p>
<p>WELFARE/ CHILD SUPPORT/ ALIMONY Public assistance or welfare payments Alimony or child support payments</p>	<p>INCOME DOES NOT INCLUDE Cost of Living Allowance (COLA) Post Allowance or Educational Allowance Travel Allowance or Foreign Transfer Allowance</p>

Non-discrimination Statement: The U.S. Department of Agriculture (USDA) prohibits discrimination in all of its programs and activities on the basis of race, color, national origin, gender, age, or disability. USDA is an equal opportunity provider and employer.