FREE AND REDUCED PRICE SCHOOL MEALS FAMILY APPLICATION

					Chook	if a factor shild (lass	I reconcibility of	
Names of ALL Household Members		Name of School for each child or indicate " NA " if child is not in school			Check if a foster child (legal responsibility of welfare or court)		Check i NO	
(First, Middle, Last)					*If all children listed below are foster children skip to Part 5 to sign this form		Income	
PART 2. BENEFITS								
		ANE provide the r		d Casa Number fo	r the ne		honofite and CL	
If any member of your household receives SN PART 5. IF NO ONE RECEIVES THESE BE				a Case Number IC	r the pe	erson who receives	benefits and Sr	
Name:						Case Number:	-	
PART 3. IF ANY CHILD YOU ARE APP				IIGRANT, OR A	RUNA	WAY, CHECK 1	HE APPROP	RIATE
BOX AND CALL 344-9582. Homeles PART 4. TOTAL HOUSEHOLD GROSS			-	ow much and	how of	iton		
PART 4. TOTAL HOUSEHOLD GROSS 1. NAME		OSS INCOME A						
	2. 010	Job Income A			1	ions, retirement,	Γ	
(List only household members with	Earni	Earnings from Work before deductions		Welfare, child support, alimony		al Security, SSI,		
income)						VA benefits	All Other Ir	ncome
(Example) Jane Smith	\$	199.99 / weekly	\$149.9	9 / every other week	\$	99.99 / monthly	\$50.00 / mo	onthly
	\$	/	\$	/	\$	/	\$ /	
	\$	/	\$	/	\$	/	\$ /	
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PART 5. SIGNATURE AND LAST FOU	\$	/	\$	/	\$	/	\$/	
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An adult household member must sign the Ap or her Social Security Number or mark the I certify (promise) that all information on this a based on the information I give. I understand information, my children may lose meal benef Sign here: Street or Mailing Address: Last four digits of Social Security Nu	oplication a "I do no applicatio d that sch fits, and I	If Part 4 is com thave a Social S on is true and that ool officials may v may be prosecute Print na	Security all incom verify (cho ed.	Number" box. (: ne is reported. I u eck) the information	See Priv nderstal on. I un	racy Statement on and that the School derstand that if I p Contact Number:	the back of this will get Federal : urposely give fal Date:	page.) funds
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