

Eligibility  
Documentation  
for  
Meal Application  
and  
Verification Section

## INTRODUCTION

This section contains information on determining eligibility for free and reduced-price meals for the National School Lunch Program (NSLP) (including charter schools and the After-School Snack Program [ASSP]) and the School Breakfast Program (SBP). It is also applicable to the Special Milk Program (SMP) when schools and institutions serve free milk to eligible children. While this eligibility guidance directly addresses the school programs, it is also generally applicable to the Child and Adult Care Food Program (CACFP) and the Summer Food Service Program (SFSP) when individual children's eligibility must be established. These programs are collectively considered the Child Nutrition Programs (CNP).

### Statutory and Regulatory Authority

Statutory authority for the CNP includes the Richard B. Russell National School Lunch Act (NSLA) and the Child Nutrition Act of 1966 (CNA). The statutory citations are, respectively, 42 United States Code 1751 et seq. and 42 United States Code 1771 et seq. Regulatory authority is found, as follows, in the Code of Federal Regulations (CFR):

- 7 CFR Part 210, National School Lunch Program (NSLP)
- 7 CFR Part 215, Special Milk Program (SMP)
- 7 CFR Part 220, School Breakfast Program (SBP)
- 7 CFR Part 225, Summer Food Service Program (SFSP)
- 7 CFR Part 226, Child and Adult Care Food Program (CACFP)
- 7 CFR Part 245, Determining Eligibility for Free and Reduced-Price Meals and Free Milk in Schools

### Administration of the Programs

The school meals programs are administered at the federal level by the Food and Nutrition Service (FNS) of the United States Department of Agriculture (USDA). At the state level, the programs are administered by the Oklahoma State Department of Education (the *State agency*).

### Resources

To keep up-to-date, regularly check the Child Nutrition (CN) Division's Web site at <http://www.fns.usda.gov/cnd> for recently posted regulations, policy clarifications, prototype application materials, and other information.

## ADMINISTRATION

### A. General Requirements (Reference page 8 of USDA Eligibility Manual—2017)

1. State agencies that administer the school meals programs must issue free and reduced-price policy guidance and any other instructions necessary to local educational agencies (LEAs) to ensure the awareness of federal and state requirements pertaining to free and reduced-price meals and free milk. Participating LEAs must provide free and reduced-price meal benefits to eligible children in accordance with the statutory and regulatory requirements as detailed in this manual.
2. All schools participating in the NSLP or SBP must make free and reduced-price meals available to eligible children, and all schools and institutions participating in the free milk option of the SMP must make free milk available to eligible children.
3. The term ***school food authority*** (SFA) is used for local agencies administering the school meals programs (i.e., the governing body that is responsible for the administration of one or more schools and has the legal authority to operate the school meals programs in those schools) while the term ***local educational agency*** (LEA) is used for those responsible for the application, certification, and verification activities of the NSLP and SBP.
4. LEA means:
  - a. The public board of education or other public or private nonprofit authority legally constituted within a state for the administrative control of public or private nonprofit schools in a political subdivision of a state.
  - b. An administrative agency or combination of school districts or counties recognized by the state.
  - c. Any other public or private nonprofit institution or agency having administrative control and direction of a public or private nonprofit school or residential child care institution (RCCI).

### B. Policy Statement (Reference page 8 of USDA Eligibility Manual—2017)

Each LEA participating in the NSLP, SBP, or the SMP (with free milk option) must have an approved free and reduced-price policy statement on file at the State agency. If an LEA is just starting its participation in the NSLP, SBP, or SMP, it must submit its policy statement to the State agency for approval. Once approved, the policy statement becomes a permanent document, amended when the LEA makes a substantive change in its free and reduced-price policy.

1. The free and reduced-price policy statement must contain, at a minimum, the following:
  - a. Name of determining official(s), or the position of the LEA or school official, designated to make eligibility determinations.
  - b. An assurance that the LEA will determine eligibility in accordance with the current Income-Eligibility Guidelines (IEGs).
  - c. LEA's specific procedures to accept applications for benefits and its Direct Certification procedures.
  - d. Description of the method(s) used to collect payments from children paying the full price of the meal or milk or the reduced-price of the meal that prevents the overt identification of the children receiving free or reduced-price meals or free milk.
  - e. An assurance that the school will abide by the hearing procedures and the nondiscrimination practices.
  - f. Copy of the application form and Letter to Household.
2. The free and reduced-price policy statement should also contain a copy of the following:
  - a. Media release
  - b. Notice to households of approval or denial of benefits

- c. Notice to households of selection for verification
- d. Notice to households of adverse action
- e. In LEAs that have opted to implement Direct Certification, the notice of eligibility under Direct Certification

3. Amendments:

- a. Unless there is a substantive change made to the free and reduced-price policy of the LEA, the policy statement need not be changed and resubmitted for State agency approval. Routine changes such as the inclusion of the new IEGs are not sufficient to require resubmission.
- b. The LEA must amend its policy statement for any substantive changes to its free and reduced-price policy and include a description of the change. In all cases, the LEA must have an approved policy statement on file at the State agency that accurately describes its current free and reduced-price policies. Amendments must be submitted for approval to the State agency by October 15. The amendment must be approved by the State agency prior to implementation.
- c. The amendments must reflect:
  - Changes made necessary by law/regulations.
  - Changes made by the LEA (e.g., changes in collection procedures, designation of new approving/hearing official[s], changes in procedures for accepting applications, revisions in the Letter to Household or free and reduced price meal/milk application).
  - Additional information specified by the State agency.

4. Policy Statement for the SMP

A free policy statement must be submitted to and approved by the State agency for LEAs participating in the SMP with the free milk option. An LEA may submit a single policy statement for the NSLP/SBP and SMP when some of its schools participate in the SMP and others participate in the NSLP/SBP.

C. Public Release (7 CFR 245.5(a))

- 1. Near the beginning of each school year, the public must be notified that the NSLP, SBP, and/or SMP are available in the school or school district. This notice must include the eligibility criteria for free and reduced-price meals and/or free milk. It must be provided to the local news media, the unemployment office, and any major employers who are contemplating large layoffs in the attendance area of the school.
- 2. The public release must also include:
  - a. The public release must contain the same information supplied in the Letter to Household, except that the public release must contain both the free and reduced-price IEGs. However, a public release that only refers to the SMP should not contain the reduced-price IEGs. **NOTE: Provision school public release is not required to include free/reduced-price IEG.**
  - b. When known to the LEA, households will be notified of their children's eligibility for free meals if they are members of households receiving assistance from:
    - The Supplemental Nutrition Assistance Program (SNAP) or, as applicable, the Food Distribution Program on Indian Reservations (FDPIR).
    - The Temporary Assistance for Needy Families (TANF) if the state program meets the statutory requirements.
    - No application is required for free meal benefits for these households.
    - All children in these households are eligible for free meal benefits. If any children were not listed on the eligibility notice, the household should contact the LEA or school to have free meal benefits extended to those children.

c. When known to the LEA, households will be notified of any child’s eligibility for free meals if the individual child is Other Source Categorically Eligible because the child is categorized as:

- Homeless, migrant, or runaway as defined by law.
- Enrolled in an eligible Head Start or Even Start.
- For any child not listed on the eligibility notice, the households should contact the LEA or school about any child also eligible under one of these programs or should submit an income application for other children.
- If households/children receiving benefits under Assistance Programs or other source programs are not notified by the school of their free meal benefits, the parent/guardian should contact his/her school.
- Households notified of their children’s eligibility must contact the LEA or school if they choose to decline the free meal benefits.

3. Copies of the public release must be made available upon request to any interested person.

D. Terms/Definitions (Reference page 14 of USDA Eligibility Manual—2017)

1. **Assistance Programs**

- a. Supplemental Nutrition Assistance Program (SNAP)
- b. Temporary Assistance for Needy Families (TANF)
- c. Medicaid (*through the WAVE only*)
- d. Food Distribution Program on Indian Reservations (FDPIR)

The determination is made through an application with appropriate case numbers or through ***Direct Certification***.

2. **Categorically eligible children** are those children automatically eligible for free meal benefits because they, or any household member, receive benefits under Assistance Programs or those children who are designated as members of Other Source Categorically Eligible Programs. An individual child’s eligibility under any of the Other Source Categorically Eligible Programs does not convey to other children in the household.

There are two ways to be classified as categorically eligible:

- Through participation in Assistance Programs—SNAP, TANF, or FDPIR (a child or any member of the household receives benefits from SNAP, TANF, or FDPIR as determined through Direct Certification or an application with appropriate case numbers.  
***OR***
- Through Other Source Categorically Eligible designation—homeless, runaway, migrant, foster child, federal Head Start program, state-funded Head Start program, and Even Start program.

3. **Direct Certification** means determining children eligible for free or reduced-priced meal benefits based on documentation obtained directly from the appropriate State agency. In most situations, Direct Certification of a child’s eligibility status should not involve the household. The communication exchange should be between an appropriate agency and the LEA/school.

- a. **Direct Certification for SNAP and TANF** is conducted through a computer/electronic match between the state and the LEA using the Oklahoma Student Information System (WAVE). ***The WAVE is located in Single Sign-on or at <https://sde.ok.gov/wave-system>***
  - Direct Certification for SNAP and TANF households must be conducted using the WAVE.
  - Direct Certification may also be conducted using letters provided to eligible participants from agencies that the family submits to the LEA/school. However, the use of eligibility letters does not fulfill the Direct Certification requirement for those households receiving

SNAP benefits. No application is necessary if eligibility is determined through the Direct Certification process.

- b. **Direct Certification for FDPIR** is conducted by receiving a list from a tribe or a letter stating the child is receiving food assistance. To receive a list, contact the tribe(s) in your area to see if they will provide this list.
  - c. **Direct Certification for Other Source Categorically Eligible Programs** can be conducted through a computer/electronic match between appropriate officials from Other Source Categorically Eligible Programs and the LEA.
  - d. Direct Certification may also be conducted using lists of eligible participants (Head Start, Even Start) provided to the LEA from appropriate officials from Other Source Categorically Eligible Programs. Letters provided by such programs to eligible participants may also be used for Direct Certification.
  - e. No application is necessary if eligibility is determined through the Direct Certification process.
4. **Direct Certification for Medicaid (DC-M)** is *NOT* considered categorically eligible. It is income based.
- Medicaid information used for direct certification can *ONLY* be pulled from *The WAVE, located in Single Sign-on or at <https://sde.ok.gov/wave-system>*
  - *The child is approved as Free or Reduced-priced depending on what it states on the Direct Certification Report*
  - A letter from the portal or from the family *CANNOT* be accepted for benefits
  - Benefits apply to all children in the household
  - SNAP benefits supersede Medicaid benefits
5. **Direct Verification** means using public records as means to verify children’s eligibility for free meals.
- NOTE: Direct verification is only done AFTER the initial application has been processed at face value.*
6. **Even Start** refers to a federally funded Even Start Family Literacy program and must be at pre-kindergarten level.
7. **Extension of categorical eligibility** means that all children in a household with at least one child or household member who receives benefits from Assistance Programs are considered categorically eligible for free meals. Any one child’s or household member’s receipt of benefits under Assistance Programs extends free school meal eligibility to all children who are members of the household.
8. **Foster child** is a child whose care and placement is the responsibility of an agency that administers a state plan under Part B or E of Title IV of the Social Security Act or a child who is formally placed with a relative or other caretaker household by a court or state child welfare agency. Whether placed by the state child welfare agency or a court, in order for a child to be considered categorically eligible for free meals, the state must retain legal custody of the child. For purposes of eligibility for Child Nutrition Programs, a foster child is considered a member of the foster parents’ household if the child is placed through a formal arrangement by a court or state child welfare agency.
9. **Free meal** is a meal served in the NSLP or SBP to a child eligible for such benefits under 7 CFR Part 245. Neither the child nor any member of the household pays or is required to work in the school or in the school’s food service to receive a free meal.

10. **Free milk** is milk served in the SMP to a child eligible for free milk under 7 CFR Part 245. Neither the child nor any member of the household pays or is required to work in the school or in the school's food service to receive free milk.
11. **Head Start** refers to the federal Head Start program and any state-funded prekindergarten classes using identical or more stringent eligibility criteria than the federal Head Start program.
12. **Household** means a group of related or nonrelated individuals who are living as one economic unit. The term *FAMILY* has the same definition. These definitions are found in 7 CFR Part 245.2.
13. **Income-Eligibility Guidelines (IEGs)** are the household-size and income levels prescribed annually by the Secretary of Agriculture for determining eligibility for free and reduced-price meals and for free milk. The free guidelines are at or below 130 percent of the federal poverty guidelines and the reduced-price guidelines are between 130 percent and at or below 185 percent of the federal poverty guidelines.
14. **Mixed households** are households that include children designated as Other Source Categorically Eligible as well as children who are not.
15. **Operating days** are the accredited days during which meal service is provided.
16. **Other Source Categorically Eligible Programs** are those which make children automatically eligible for free benefits, either through Direct Certification or application, because the children are:
  - a. Enrolled in a federal Head Start program.
  - b. Enrolled in Even Start—a participant in a federally funded Even Start Family Literacy Program must be at the prekindergarten level.
  - c. Determined a homeless child by the school district's homeless liaison or by the director of a homeless shelter.
  - d. Determined a migrant child by the state or local Migrant Education Program (MEP) coordinator.
  - e. Determined a runaway child who is receiving assistance from a program under the Runaway and Homeless Youth Act and is identified by the local education liaison.
  - f. Determined to be a foster child whose care and placement is the responsibility of the state or formally placed by a court with a caretaker household and the state retains legal custody of the child.

***NOTE: A child's eligibility for free meals under Other Source Categorical Eligibility does not extend to any other child in the household.***

17. **Overt identification.** (Reference USDA Memo SP-45-2012 and pages 18-19 of USDA Eligibility Manual—2017)
  - a. **Defining Overt Identification:** Overt identification is any action that may result in a child being recognized as potentially eligible to receive or certified for free or reduced-price school meals. 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, including notification of the availability of free or reduced-price benefits, certification and notification of eligibility, provision of meals in the cafeteria, the point of service, providing additional services such as educational services to low-income children, and through the method of payment.
  - b. **Preventing Overt Identification of Directly Certified Children:** SFAs are not required to provide applications to parents when children are eligible for free meals through Direct Certification, but must assure that these children are not overtly identified through the method used to distribute applications. If an SFA distributes applications to individual households, such

as by mail (including e-mail) or in individual student packets or online availability, applications do not have to be provided to households in which all children are determined eligible through Direct Certification. If the distribution method is not individualized, all households must be provided applications. (See 7 CFR §245.6[b][10].)

- c. **Prohibited Actions:** The following actions are prevented by law and regulation:
- Publicizing or announcing eligible households or children’s names
  - Using different mediums of exchange (*see Item d*)
  - Having separate dining areas, service times, or serving lines
  - Limiting choices of reimbursable meals
  - Requiring that children work for their meals
- (*See the Richard B. Russell National School Lunch Act Section 9[b][10], 42 U.S.C. 1758[b][10], and 7 CFR §245.8.*)
- d. **Medium of Exchange Restrictions:** Of particular concern is prevention of overt identification in the food service area, especially at the point of service. Any meal cards, tickets, tokens, or other methods to obtain reimbursable meals cannot be coded or colored in a manner that would overtly identify free and reduced-price eligible children. In addition, SFAs must take steps to assure that rosters, computer screens, or other equipment used at the point of service cannot be viewed by anyone not needing the information, especially students. Further, the information on the rosters or screens should be masked or coded to avoid other students discerning any student’s eligibility status.

SFAs are encouraged to use prepayment systems as much as possible to limit exchange of money which can inadvertently indicate a student’s eligibility status. SFAs must make reasonable efforts to publicize and encourage use of prepayment options by students and parents. SFAs should provide multiple ways to make prepayments, such as online; multiple locations within the school, especially when students are arriving or changing classes; and reminding parents through e-mail, written notices, or other means when a student’s balance is low.

- e. **Food Service Area Considerations:** SFAs are prohibited from having separate dining areas, service times, serving lines, or limiting the choices of reimbursable meals based on a student’s eligibility status. In addition, SFAs choosing to sell competitive foods during the meal service are encouraged to ensure the operation of the sale of competitive foods does not inadvertently result in eligible children being identified. Ways to limit overt identification related to the sale of competitive foods include:
- Limit competitive foods to those also offered as part of reimbursable meals on the reimbursable lunch lines.
  - Offer competitive foods on the same lines as reimbursable meals are offered.
  - Only allow competitive foods to be purchased with a prepaid card.
- f. **Monitoring:** SFAs must avoid any policy or practice that has the effect of overtly identifying eligible children. Where necessary, LEAs should promptly update their policy statements, implementation procedures, and operations to comply with this guidance.
18. **Reduced-price meal** is a lunch priced at 40 cents or less, an afternoon snack priced at 15 cents or less, or a breakfast priced at 30 cents or less, to a child eligible for such benefits under 7 CFR Part 245.
19. **Residential child care institution (RCCI)** is generally any distinct part of a public or nonprofit private institution that:
- a. Maintains children in residence.
  - b. Operates principally for the care of children.
  - c. If private, is licensed by the state or local government to provide residential child care services under the appropriate licensing code.



The regulatory definition of **SCHOOL** for NSLP, SBP, and SMP includes RCCIs

20. **School year** is the period between July 1 and June 30.
21. **Working days** are those days when school is open, teachers and/or school administrators are on-site, but food service is not in operation.

## APPLICATIONS (Reference pages 22-34 of USDA Eligibility Manual—2017)

### A. Submission of Free and Reduced-Price Meal Applications by All Households

1. The NSLA, which includes snacks, the SBP, and the SMP, requires that SFAs inform households of the availability of the program(s) and how a household may apply for free or reduced-price benefits (7 CFR §245.6). However, neither the NSLA, the CNA, nor the regulations and guidance material governing these programs has a requirement that would mandate submission of a free and reduced-price meal application. While school officials must make families aware of the availability of free and reduced-price meals (except for RCCIs and nonpricing schools) and may even request that households apply, school officials **may not require** that a household submit a free and reduced-price meal application. A site or SFA wishing to require income information from all households with enrolled children for purposes other than Child Nutrition must secure information through means other than the household's free and reduced-price meal application. SFAs that provide households with multiuse applications (i.e., those which include both meal program benefits as well as nonfood benefits) must ensure that the process does not violate the requirements specified herein. A copy of the Letter to Household and free and reduced-price applications can be found on **pages E-53** through **E-60**.
2. It is the households's responsibility to complete the application. The LEA may send households an application with the child's name and the household's name and address preprinted on it. However, no other information required for an eligibility determination may be preprinted.

### B. Household Applications

Section 105 of the Child Nutrition and WIC Reauthorization Act of 2004 requires SFAs to distribute household applications rather than individual student applications.

1. SFAs may not request a separate application for each child in the household who attends different sites within the same district.
  2. If a household does submit a separate application for each student in the household, the SFA should:
    - a. Staple all individual applications pertaining to the same household together.
    - b. Make sure all information on each application is the same; if so, approve or deny the application as usual.
    - c. If the information is different, contact the household to clear up any questions and document correct information. Once correct information is obtained, approve or deny the application as usual.
    - d. Count all individual student applications pertaining to the same household as **ONE** application when calculating the number that needs to be verified.
- C. Application for Free and Reduced-Price School Meals—Refer to **pages E-59-60** for a prototype application.

**NOTE: If an SFA changes the prototype, *paper application, online application, or one created by the software company*, the application must be approved by the State agency before the SFA is allowed to use it.**

***The application and Letter to Household cannot be accepted or processed by an SFA prior to July 1 of each school year.***

#### 1. Categorically Eligible Children

Categorical applications based on ***SNAP, TANF, and/or FDPIR Households (Assistance Programs)***

The application **MUST** request that the household provide the following:

- a. Names of all household members.
- b. A SNAP, TANF, or FDPIR case number for any household member. One case number will qualify all enrolled students to receive free meal benefits within that household. (Reference USDA Policy Memo SP-38-2009)
  - (1) SNAP:\* A valid SNAP number may begin with the letters **A, B, C, D, H, J, or T** followed by six to nine digits. All valid numbers **MUST** be Oklahoma-issued. Some numbers could also include a dash, followed by two additional numbers. **Individuals receiving SoonerCare benefits DO NOT automatically qualify for free meal benefits.**
  - (2) TANF:\* A valid TANF number is recognized by a six- to nine-digit number beginning with the letter **C** or **H**. All valid numbers **MUST** be Oklahoma-issued. This number could be followed by a dash with two additional numbers.
  - (3) FDPIR:\* FDPIR is a federal program that provides USDA Foods (commodities) to low-income households living on Indian reservations and to participating Native American families residing in the State of Oklahoma. An FDPIR number may appear to be any combination of letters and/or numbers. It has no identifiable format. **A tribal roll card is not verification of receiving FDPIR benefits.**
    - \* There are no **mixed households** under the Assistance Programs. If an application contains a single case number for SNAP, TANF, or FDPIR, all enrolled children listed on the application must be approved for free meal benefits. This extension of categorical eligibility also applies to the Direct Certification process. Any income information on an application containing a **single/correct** SNAP, TANF, or FDPIR case number should be disregarded. (Reference USDA Policy Memo SP-38-2009)
    - \* If there is any doubt of the validity of a case number submitted on an application, the SFA should contact the appropriate SNAP, TANF, or FDPIR official and document the findings. (This is only for numbers that are not formatted as Oklahoma numbers.)
- c. The signature of an adult household member.

## 2. Other Source Categorically Eligible **Foster Children**

Section 102 of the Healthy, Hunger-Free Act of 2010 amends Section 9(b)(12)(A) of the NSLA to provide categorical eligibility for free meals, without further application, to any foster child whose care and placement is the responsibility of the state or who is placed by a court with a caretaker household. In addition, the Act amends Section 9(b)(5) of the NSLA to allow certification of a foster child for free meals without application if the LEA or other CNP institution obtains documentation from an appropriate state or local agency indicating the status of the child as a foster child whose care and placement is the responsibility of the state or that the foster child has been placed with a caretaker household by a court.

It is important to note that these provisions only apply to foster children formally placed by a state child welfare agency or a court. They do not apply to informal arrangements that may exist outside of state- or court-based systems.

This change to allow categorical eligibility for free meals for foster children necessitates changes in the way free and reduced-price applications are handled. Previously, a separate application for free and reduced-price meals was submitted for a foster child who was considered a household of one.

Now, the foster child is categorically eligible and may be certified without an application. Households with foster and nonfoster children may choose to include the foster child as a household member, as well as any personal income earned by the foster child on the same household application that includes their nonfoster children. This will streamline the application process and may help the foster family's nonfoster children qualify for free or reduced-price meals based on household size and income.

In processing the application, the SFA would certify the foster child for free meals and then make an eligibility determination for the remainder of the household based on the household's income (including personal income earned by the foster child) or other categorical eligibility information reported on the application. As before, foster payments received by the family from the placing agency are not considered income and do not need to be reported. **NOTE: The presence of a foster child in the household does NOT convey eligibility for free meals to all children in the household in the same manner as SNAP, TANF, and FDPIR participation does.**

3. Other Source Categorical Eligibility (*Except Foster Children*)

Other Source Categorical Eligibility also applies to migrant, runaway, and homeless children. If you receive an application with the homeless box checked, you will need to contact your homeless liaison to see if the student is on the homeless, migrant, and runaway list. Simply checking this box does not validate a homeless student as free.

Documentation from Head Start for children enrolled in the district indicate free eligibility. The Head Start/Even Start authority must list those eligible Head Start/Even Start children and sign off on the form. A sample form is on **page E-65**

A school official may complete an application on behalf of a child based on household size and income or Other Source Categorical Eligibility status known to the official and notify the household that his/her child has been certified for free or reduced-price benefits. The source of information must be noted on the application. (Refer to page 42 in the Eligibility Manual, June 29, 2017.)

4. Income application must contain the following in order to be deemed a completed application: (Refer to of Eligibility Manual, June 29, 2017 for the IEGs.)

- a. The names of all household members, including each child for whom the application is made.
- b. The total income earned by children in the household, if applicable.
- c. The amount of gross income (*before taxes*) received in the prior month by each adult household member.
- d. The last four digits of the social security number of the adult household member who signs the application or an indication that the household member does not have one. (Reference USDA Policy Memo SP-19-2011)
- e. The signature of an adult household member (An electronic signature is acceptable for web-based applications)

D. Applications in Foreign Language Translations

1. The application materials and other communications with households concerning eligibility determinations must be in a language that parents and guardians can understand in order to diminish any language barriers to participation for Limited English Proficient (LEP) families. (Title 6 of the Civil Rights Act of 1964) Where households need information in a language other than English, LEAs must make reasonable efforts, considering the number of such households, to provide household letters and application forms to them in the appropriate languages **Failure to do so may be discrimination on the basis of national origin and in violation of the Act. (Reference Memo SP-3-7-2016)**
2. The FNS Web site <http://www.fns.usda.gov/school-meals/translated-applications> has the prototype application and materials translated into a number of languages. LEAs are responsible for ensuring that all applications and other household materials used in the application process are available in a language the LEP household can understand. Additionally, households can be assisted with completing the application process through the use of personnel proficient in foreign languages.

3. LEAs are currently assisting LEP families as required under Title 6 of the Civil Rights Act of 1964. Under Title 6, LEAs have a responsibility to be aware of the language needs of LEP households and ensure these households have access to the same information other parents have in a manner they can easily understand. LEAs are reminded that free and reduced-price application materials can easily be included along with educational materials that are provided to LEP families under the requirements of Title 6.
4. LEAs must have a system in place to identify language needs of families. LEAs can use the information gained through the Home Language Survey conducted during the school enrollment process to identify the language used in households.
5. LEAs and state agencies must:
  - Be familiar with the translated application materials available through FNS. Use the Home Language Survey, USDA's *I Speak* survey, or other surveys to help identify LEP families. Be familiar with languages used in the community and the potential need for materials in those languages.
  - After assessing potential language needs, determine where information or translation services in those languages may be obtained.
  - After identifying LEP households, ensure that the households applying for benefits receive language services.
  - For parents or guardians who are unable to read or have limited literacy, state agencies and LEAs must provide the necessary services so that parents or guardians are assisted with completing the application process. This may entail providing oral interpretation services. Parents should not be expected to rely on family members (especially children) or friends as interpreters as they may not be able to provide quality and accurate interpretations.
  - State agencies and LEAs must have a system in place to assist LEP households through the verification process. Follow up with LEP households that do not respond to the initial verification request.
  - When possible, state agencies and LEAs should also partner with other local resources, such as migrant or refugee assistance agencies.

## E. Applications Information

### 1. Free and Reduced-Price Reimbursement

The SFA or school **MUST** have on file an approved application or a list of directly certified students showing the name of each student served a meal or milk which meets program requirements.

### 2. Benefits Prior to Approval

- a. Before applications are approved for the school year, the SFA may only claim and be reimbursed for free and reduced-price meals or free milk served to:
  - Children from households with approved applications on file from the previous year.
  - New children in an SFA from households with children who were approved for benefits the previous year.
  - **Transfer Students**—Previously approved children who transfer from one district to another, as long as the receiving site obtains a copy of the prior year's or current year's application from the sending SFA.
- b. LEAs have flexibility concerning the effective date of certification for **application approval as well as Direct Certification determination** for program benefits. Section 9(b)(9)(A) of the Richard B. Russell National School Lunch Act, 42 U.S.C. 1758(b)(9)(A), states that a child in a household meeting the income limits **at the time the application is submitted . . . shall be served a free lunch**. Section 9(b)(9)(B) provides the same authority for reduced-price lunches. **Therefore, if the LEA chooses, it could establish the date of submission of an application as the effective date of eligibility rather than the date the official approves it.**

This flexibility applies to eligibility determinations made through the application process only and only to complete applications containing all required information at the time of submission. LEAs can use this flexibility when processing household income applications as well as when waiting for documentation of Other Source Categorical Eligibility (e.g., for homeless or migrant children) indicated on a household application.

LEAs must notify the State agency as to what date will be used for application approval. This information will be captured on each renewal application. (Reference USDA Memo SP-11-2014)

### 3. Carryover Applications

- a. SFAs **MUST** carry over the eligibility status from the previous year for any child enrolled in the current school year. This applies to Direct Certification, categorical eligibility determinations, and income applications. Carryover of the eligibility status from the previous year also applies to children in Head Start programs **IF** the SFA administers both the Head Start program and the school in which the child attends kindergarten.
- b. Currently enrolled students' eligibility status from a prior year is only valid for the first 30 operating days of the school year (beginning with the first day of school in which meals are served and claimed for reimbursement after July 1). This means that if a site within the district operates a summer school in which meals are served **under NSLP and/or SBP**, and the summer school continues into the month of July, the first day of the 30-day operating period for that particular site would begin on the first day summer school is in session in July.
- c. SFAs **CANNOT** establish a shorter time frame for carryover applications.
- d. Once a new application is obtained and approved, the carryover application is no longer valid. If a new application is not received within the 30-day period, benefits are terminated for the child on Day 31. A letter of adverse action **is not necessary** if terminating benefits for this reason. However, if the eligibility status **has changed**, the SFA would report the student's eligibility in both categories for the month that the new application was approved.

**For example:** The first 30 days of the new school year ends September 15. A student who qualified for free meals in the previous school year submits an application for the new school year on September 10. The school has ten days from receipt of an application to approve or deny and issue benefits if any apply. The SFA approves the new application at a reduced-price status on September 11; therefore, the SFA would report this student in the free eligible category from September 1 through 10 and claim the meals served to him or her accordingly. Effective September 11 through 30, the student would be reported in the reduced-price eligibility status and meals served to him or her during that time would be claimed as reduced-price. Beginning October 1, this student would be reported and claimed in the reduced-price category only.

- e. If, during the same month, a student's benefits are denied on the 31st day and then an application is submitted and approved at the same eligibility as before the 31st day, the SFA would only count that student's eligibility once during that month.
- f. If students listed on the household application attend different sites and each site begins school on a different date, each child's benefit on the household application would then expire on a different date.
- g. **Provision/CEP: Students Transferring within the same LEA**

If a student transfers from a Provision school to a non-Provision school within the same LEA and the student is not otherwise eligible for free meals, the receiving LEA must provide free meals to the transfer student for up to 30 operating days or until a new eligibility determination is made, whichever comes first.

**Provision/CEP: Students Transferring between LEAs**

If a student transfers from a Provision school to a non-Provision school in a different LEA, the receiving LEA must provide free meals to the transfer student for up to 30 operating days or until a new eligibility determination is made, whichever comes first.

4. Disaster Response (Reference USDA Policy Memo SP-25-2012)

The following students would be eligible for free meals in situations resulting from danger or disruptions due to natural disasters such as hurricanes, tornadoes, and/or floods.

- a. Children determined to be homeless under the McKinney-Vento Homeless Assistance Act.
- b. Children in households receiving Disaster Supplemental Nutrition Assistance Program (D-SNAP).
- c. Certification by school officials.

## **PROCESSING APPLICATIONS** (Reference pages 50-64 of USDA Eligibility Manual—2017)

### A. Time Frame for Processing Applications

1. Applications should be reviewed and an eligibility determination must be made within ten operating days of the receipt of the application. (Whenever possible, applications should be processed immediately, particularly for children who do not have approved applications on file from the previous year.)

***NOTE: The SFA must not delay approval of the application if the household fails to provide only information that is not required.***

2. Households should be notified immediately if benefits are denied or reduced from the level of the previous year in order to provide adequate time for the family to make appropriate arrangements for payment to prevent the household from accumulating meal charges. Appeal rights must be sent in writing to the household.
3. A new, lower eligibility determination should be implemented only after the family has been notified. For example, in the case of a household that received free benefits the previous year and will now receive reduced-price benefits for the new school year, adequate notice should be provided. Appeal rights must be sent in writing to the household.
4. The carryover period is in place to allow schools an appropriate amount of time to process applications, especially large school districts. However, it is not the intent that schools delay the processing of applications. Instead, schools must process applications as they are received and promptly notify the household.

### B. Eligibility Criteria

1. For a child to be eligible for free or reduced-price benefits, the child ***MUST*** have been directly certified or the household ***MUST*** have submitted a complete application and be either categorically eligible or income-eligible. This includes students attending public school during the day, but who reside in an institution.
  - a. Complete Application—An application that contains all required information for making an eligibility determination.
  - b. Categorical Eligibility—If SNAP, TANF, or FDPIR benefits are received for a household, all enrolled children in that household would be eligible for free meals or milk when the household submits a complete application.
  - c. ***Other Source Categorically Eligible Programs*** are those which make children automatically eligible for free benefits, either through Direct Certification or applications, because the children are:
    - Enrolled in a federal Head Start program.
    - Enrolled in Even Start—a participant in a federally funded Even Start Family Literacy program must be at the prekindergarten level.

- Determined a homeless child by the school district’s homeless liaison or by the director of a homeless shelter.
- Determined a migrant child by the state or local MEP coordinator.
- Determined a runaway child who is receiving assistance from a program under the Run-away and Homeless Youth Act and identified by the local educational liaison.
- Determined to be a foster child whose care and placement is the responsibility of the state or formally placed by a court with a caretaker household.

A child’s eligibility for free meals under Other Source Categorical Eligibility does not extend to any other child in the household.

- d. Medicaid on the Wave (DC-M)—Children who appear on the direct certification list pulled from the Wave can be approved for Free or Reduced-priced meals.
    - If a child is indicated receiving Medicaid on the Wave, benefits are extended to other children living in the household.
    - If the household list a Medicaid number on the application, it does not approve the child for benefits
    - If a letter of Medicaid benefits is given to the district or printed off the portal, it does not approve the child for benefits.
  - e. Income Eligibility—Children from a household that submits a complete application, and the sum of the reported income for the household is at or below the income-eligibility guidelines, are eligible for either free or reduced-price benefits, as applicable.
2. The determining official **MUST** review each incoming application to ensure that the household has submitted a complete application. If the application is complete, the official **MUST** then determine whether the household is categorically eligible or income-eligible for benefits.
  3. Applications for households that are not categorically eligible or income-eligible cannot be approved for benefits.
  4. United States citizenship is **NOT** a condition of eligibility for free or reduced-price benefits. SFAs **MUST** apply the same eligibility criteria for citizens and noncitizens, regardless of immigration status.
  5. USDA has determined that the CNP is not subject to Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) that restricts certain welfare and public benefits for aliens.

### C. Different Types of Eligibility

1. On applications indicating mixed households where some children are Other Source Categorical Eligible and some children are not, the LEA must have a method to process different eligibility statuses that may result from these applications. While the household cannot be required to submit multiple applications, the LEA may reproduce the application to accommodate more than one eligibility status or may process the application separately in a computer-based system.
2. After the Other Source Categorical Eligible children are determined eligible for free meal benefits, the LEA must then use the household’s income and size (including children in the Other Source category) to determine if the noncategorically eligible children listed on the application are eligible for meal benefits.
3. In such mixed households, Other Source Categorical Eligible children will receive free meal benefits even if other children listed on the application are determined either eligible for reduced-price meals or ineligible for free or reduced-price meal benefits.



4. A complete mixed application must provide:
  - Names of all household members.
  - A checked box indicating the Other Source Categorical Eligibility status of a child; for a foster child, list any personal income made available to the foster child and earned by the foster child, as appropriate.
  - Signature of an adult household member.
  - Last four digits of the social security number of the adult household member who signs the application or an indication that the household member does not have a social security number.
5. Applications must still request that applicants write a **ZERO** when there is no income to report but will no longer require a separate indication of no income from the applicant.
  - When zero income is provided for all of the adult household members, the application is still considered complete if it includes a social security number, date, and signature.
  - If local officials have known or available information that household income was reported incorrectly, the application will be verified for cause.
  - Income for all children is consolidated in one income field on the prototype application.

#### D. Computing of Current Income

1. Each household **MUST** provide the amount of gross income. Income **MUST** be identified with the individual who received it and the source of the income (such as wages or welfare). It is the responsibility of the determining official to compute the household's total current income and compare the total amount to the income-eligibility guidelines. A copy of the IEG is on **page E-62**.
2. Income received at different intervals: Households may have income from different sources which are paid on different schedules. For example, the household may receive paychecks on a weekly basis and child support on a monthly basis. This section explains when conversion of income is required and how conversion is done.
  - a. No conversion is required if there is only one source of income or if all sources are received in the same frequency. The SFA would total all sources and compare them to the appropriate IEG. For example, if a household of three reported receiving a monthly social security check and monthly child support, those amounts would be added together and the result compared to the monthly IEG for a household of three.
  - b. Conversion is required if there are multiple income sources with more than one frequency; the SFA must annualize all income by multiplying:
    - **Weekly income by 52.**
    - **Every other week income by 26.**
    - **Twice a month income by 24.**
    - **Monthly income by 12.**

*NOTE: SFAs CANNOT use conversion factors such as 4.33 to convert weekly income or 2.15 to convert biweekly income to monthly amounts. Software used must reflect this policy.*
  - c. Do not round the values resulting from each conversion.
  - d. Add all of the unrounded, converted values, and compare the unrounded total to the appropriate IEG for annual income for the household size.

**NOTE: In situations where income is reported weekly, every two weeks, monthly, or twice a month, and the software has no provision for dealing with dollars and cents, calculations**

*should be done manually to arrive at the most accurate annual income. All computerized software must include both the dollar amount and the CENT amount, unless the cents are computed manually.*

E. Application Approval or Denial

1. Households that submit an incomplete application cannot be approved. If any **REQUIRED** information is missing, the information **MUST** be obtained before an eligibility determination can be made.
2. To get the required information, the school may return the application to the household or contact the household either in person, by phone, or in writing. The determining official must document the details of the contact and date and initial the entry. Applications missing the signature of an adult household member **MUST** be returned for signature.
3. Every reasonable effort should be made to obtain the missing information prior to denying the application.
4. If there are any inconsistencies or questions concerning the required eligibility information provided, the household's application **MUST** be denied unless the inconsistencies or questions are resolved. For instance, if it is unclear whether the household provided weekly or monthly income, this issue **MUST** be resolved before an eligibility determination can be made. The official may contact the household prior to denial, document the details of the contact, and date and initial the entry.

F. Homeless, Migrant, Runaway Children (Refer to pages 38-42 of the 2017 USDA Eligibility Manual)

1. Documentation of free meal eligibility:

Rather than an approved free and reduced-price meal application, site officials must accept documentation from the local educational liaison/coordinator or a director of a shelter where the child resides to establish free meal benefits. Documentation to substantiate free meal eligibility must consist of the child's name or a list of names, effective date(s), and the signature of the local educational liaison/coordinator or the director of the shelter. This list comes from the liaison, not Child Nutrition. Child Nutrition just accepts the list at face value unless there is a concern that something is questionable. In this case, Child Nutrition would still move forward with approval but then conduct **verification for cause**.

To implement these procedures, school officials must work closely with the educational liaison/coordinator or director of a shelter to ensure that the child is provided free meal benefits as soon as possible.

**Exception:** Because of delays in receiving documentation from appropriate agencies or officials, a school official may submit an application on behalf of a child that he or she knows to be categorically eligible due to his or her status as a migrant, homeless, or runaway child. These applications must be done in accordance with the temporary approval procedures.

Once the documentation is received, that information must be noted on the application and the child's eligibility status is effective for the remainder of the school year and also would carry over for up to 30 operating days in the next school year. If no documentation is received to confirm the child's status as a migrant, homeless, or runaway child, the child's benefits are terminated and a new application must be filed, either by a school official or by the child's parent or guardian.

2. Homeless, migrant, runaway children residing with another household:

A child or family may temporarily reside with another household and still be considered homeless under the definition of homeless in the McKinney-Vento Homeless Assistance Act. In these cases, the household size and income of the host family is **NOT** taken into consideration in deter-

mining the free meal eligibility for the child designated by the LEA liaison/coordinator.

Additionally, when a host family applies for free or reduced-price meals for its own children, the host family may include the homeless/migrant family or runaway children as household members if the host family provides financial support to the homeless/migrant family or runaway children, such as shelter, utilities, clothing, or food. In such cases, the host family must also include any income received by the homeless/migrant family or runaway children. Site officials must determine eligibility for the host family in the traditional manner. However, free meal eligibility for the homeless/migrant/runaway child is based on the documentation provided by the LEA liaison/coordinator, even when the child is included on the host family's free and reduced-price meal application.

If the host family meets the free or reduced-price meal eligibility criteria, school officials should provide the host family with approval for free or reduced-price meal benefits, as appropriate.

3. Continuing certification:

Public Law 108-265 also amended the Richard B. Russell School Lunch Act to establish that, once a homeless/migrant or runaway child is certified as eligible to receive free meals, eligibility remains effective for the remainder of the school year. Further, SFAs are allowed to continue the child's eligibility from the previous year for 30 operating days into the subsequent school year or until a new eligibility determination is made. This determination must be reconfirmed with the liaison each school year.

G. Households That Fail to Apply

1. School officials may complete an application for a student **known to be eligible** if the household fails to apply. When exercising this option, the school official **MUST** complete an application on behalf of the student based on his or her knowledge of household-size and income information. **The source of the information MUST be noted on the application.** Names of household members and the last four digits of the social security number and signature of an adult household member need not be secured. These applications should be excluded from verification. However, the household **MUST** be notified that the student has been certified and is receiving free meal benefits.
2. This option is intended for **LIMITED** use in **INDIVIDUAL** situations and **must not** be used to make eligibility determinations for categories or groups of students. This option **is not intended** to be used for households who qualified in the previous year but for some reason have failed to apply in the current school year.

H. Notice to Households of Approval/Denial of Benefits

1. All households **MUST** be notified of their eligibility status verbally, in writing, or by e-mail.
2. Households **DENIED** benefits or approved for benefits through Direct Certification **MUST** be given written notification of denial or approval. A copy of the Notice to Households of Approval/Denial of Benefits is found on **page E-63**. The notification **MUST** advise the household of:
  - a. The reason for denial of benefits.
  - b. The right to appeal.
  - c. Instructions on how to appeal.
  - d. A statement that households may reapply for free or reduced-price benefits at any time during the school year. Nonpricing SFAs are exempt from being required to notify the household of approval/denial of benefits. However, the Notice of Direct Certification is still required.
3. Duration of free and reduced-price eligibility determination.
  - a. The Child Nutrition and WIC Reauthorization Act of 2004 states that once a household is approved for free and reduced-price benefits, the household will remain eligible for those

benefits for the remainder of the school year plus a maximum of 30 operating days in the subsequent school year. Also, the family is no longer required to report income increases; loss of SNAP, TANF, or FDPIR eligibility; or family-size reductions. (Reference USDA Policy Memos 2004-CN-07, 2004-CN-09, 2004-SP-02, and 2004-SP-03)

- b. There are three exceptions in which the duration of an application would not last the entire school year.
  - **Application error:** The SFA finds that it made an error in initial approval.
  - **Verification:** Through the verification process, documentation does not support initial approval.
  - **Family refuses benefits:** Family notifies SFA to decline any meal benefit.

**NOTE: Temporary approval of an application is no longer applicable because of the year-long duration of eligibility provision. If LEAs/schools are concerned with the authenticity of the information provided on an application, they may, on a case-by-case basis, verify the application for cause.**

- c. If a family notifies the SFA later in the year which would result in benefits less than initially approved at the beginning of the school year (e.g., from free to reduced-price or full-price), the family **MUST** be given the option to continue with the benefits approved at the beginning of the year or choose the reduced benefits. If the family chooses the reduced benefits, the SFA must provide a notice of adverse action. However, if a family notifies the SFA later in the year which qualifies them for increased benefits (e.g., from reduced-price to free), the increase in benefits must be provided.

## I. Record Keeping of Applications

1. All free and reduced-price applications, including applications from households denied benefits and inactive applications, **MUST** be kept on file for a minimum of three years after the final claim is submitted for the fiscal year to which they pertain, and they **MUST** be readily retrievable by school site. Files **MUST** be kept longer if they are required for an audit. If audit findings have not been resolved, the applications **MUST** be maintained as long as required for resolution of the issues raised by the audit.

**NOTE: Provision 2 and Provision 3 schools must maintain base year applications for as long as the schools are participating in Provision 2 or Provision 3.**

2. For applications from households approved for benefits, the determining official must indicate the date each application is approved and the level of benefit for which each child is approved. The determining official must also sign or initial the application.
3. For applications from households denied benefits, the determining official **MUST** identify and retain on file the reasons for the denial. Records should also include the date of the denial, the date the denial notice is sent, and the signature or initials of the determining official. These may be noted directly on the application.
4. If there are changes in application status (i.e., approval errors, verification, parental request), determining officials should note the change and the date of the change on the application and on any rosters used. Thorough annotation includes:
  - a. The date the change was reported.
  - b. Why the change was made.
  - c. Who called and reported the change.
  - d. The initials of the person making the change.

5. When a child transfers to another site within the SFA or transfers to another district within the state, a copy of the application **MUST** be retained at both the sending and receiving sites and the date of the transfer noted, unless applications are filed centrally. Current applications **MUST** be on file, and there **MUST** be records to support transfers of students in and out of the site.
6. When a child transfers within the same LEA from a school using Provision 2 or 3, a new application or Direct Certification is required unless the transfer is in a base year and the child's individual eligibility information is available. If the transfer is done in a nonbase year, a new application is required. This is also applicable when a child transfers to a new school district.

J. Restrictions for Processing Applications

1. Distribution and processing applications **solely for information about household income** to determine the funding or benefits for programs other than the school meals programs or to determine eligibility for other programs is not permitted. Therefore, funds in the nonprofit school food service account cannot be used to pay the costs associated with collecting and processing such information.
2. A school or LEA must obtain the household income information for nonprogram purposes through means other than the household's application for free or reduced-price school meal benefits. If schools or LEAs collect such information for **nonprogram purposes**, the applications **may not be labeled as applications for meal benefits** under the school meals/milk programs or give any indication that such benefits are contingent upon a household returning the application.
3. If LEAs provide households with multiuse applications, which include both meal program benefits as well as nonfood benefits, they must ensure that the process allows submission of an application solely for free or reduced-price meal or free milk benefits.
4. The LEA must seek consent from the parent(s) or guardian(s) to use the information provided on the application for nonprogram purposes or for purposes not permitted in this guidance.

K. Computerized Application Approval (Reference page 72 of USDA Eligibility Manual—2017)

1. Any computerized approval process:
  - Computerized applications must be approved each year by the State agency before use . They can be sent to Karen Davis at Karen.Davis@sde.ok.gov for approval.
  - A signature of approval is not required on each application if the approval process is computerized. A list of the children approved for free or reduced-price meals needs to be printed, signed, and dated to indicate approval of the applications. A new roster should be printed, signed, and dated at least monthly.
2. Scanner system:
  - a. The SFA is assured that the scanner system is accurately and reliably capturing the free and reduced-price meal application information. It must be capturing both the dollar and cent amounts reported by the household unless computed manually. (Reference USDA Policy Memo 2007-CN-04)
  - b. If software is used to determine eligibility from the scanned applications, the SFA must ensure that manual edits are in place to secure free and reduced-price determinations. (Reference USDA Policy Memo 2007-CN-04)
  - c. Access or security procedures are maintained to ensure confidentiality of the information. All disclosure restrictions must be met, and acceptance of the application and electronic signatures must be in accordance with guidance issued by FNS <http://www.fns.usda.gov/cnd/governance/Policy-Memos/2007/SP 10-2007.pdf>.
  - d. The paper copies of applications are maintained in any current year. Electronically scanned copies must be maintained for a minimum of three years after the submission of the final

- e. claim for reimbursement for the fiscal year or longer as required for audit resolution.
- e. Procedures are developed to make an accurate count of the free and reduced-price meal applications prior to the scanning of each batch. This count must be compared to applications successfully scanned to ensure that all applications are entered into the system.
- f. The State agency may require that the paper copies be retrieved by school (if desired) if the electronically scanned versions of the applications are not operationally accessible in a timely manner or for any other reason.
- g. Paper copies of the applications must be retained for any sites on Provision 1, 2, or 3 for three years beyond the establishment of a new base year or longer as needed for audit resolution.
- h. Adequate backup is maintained for the electronic files.
- i. The electronic application system should also include a statement which explains how to obtain a paper application should a household decide it no longer wants to complete an electronic application.

3. Electronic signatures and applications (Public Law 108-265, Section 105).

A household application may be executed using an electronic signature if:

- a. The application is submitted electronically.
- AND**
- b. The electronic application filing system meets confidentiality standards established by USDA.

***NOTE: USDA, FNS, and state agencies do not evaluate, recommend, approve, or endorse any software used for certification or verification purposes. There are no federal specifications for software vendors. LEAs are responsible for assuring that the certification and verification processes meet all regulatory requirements and policies, including the calculation of income frequencies. Therefore, if software is used to perform all or part of the certification or verification process, the LEA must assure the software used is performing correctly and meets all requirements.***

L. CNP Rosters

- 1. Once applications are approved, the SFA is responsible for maintaining current eligibility status of all students. Benefit issuance rosters are lists of students eligible to receive free, reduced-price, or full-price meals. As with the free and reduced-price meal application, these rosters are to be confidential and used only by persons directly involved with the CNP. An example of a CNP roster is on **page E-64**.

Although most SFAs are computerized in their meal-counting and meal-claiming process, most of these systems do not provide all the necessary information that the roster reflects.

- 2. Rosters should include the following information:
  - a. The date a student became eligible for benefits.
  - b. The date a student withdraws from school or transfers to another school.
  - c. The date a student's eligibility category changes as a result of verification or reported change in household status.
- 3. If multiple rosters are used (e.g., one in the office for benefit issuance and one at the point of service for meal counts), it is essential that all rosters be updated and printed on a regular basis (at least monthly) to reflect current eligibility status.

M. Eligibility Definitions

Although school officials may have to use their own discretion in some instances, the following guidelines are intended to provide assistance in answering questions from households and in making income-eligibility determinations.

## 1. Determining Household Size

- a. **Adopted Child**—An adopted child for whom a household has accepted legal responsibility is considered to be a member of that household. If the adoption is a **SUBSIDIZED** adoption (children who are difficult to place), the subsidy is included in the total household income.
- b. **Child Attending an Institution**—A child who attends but does not reside in an institution is considered a member of the household in which he or she resides.
- c. **Child Away at School**—A child who is temporarily away at school (e.g., attending boarding school or college) should be considered as a member of the household.
- d. **Child Living With One Parent, Relatives, or Friends**—In cases where no specific welfare agency or court is legally responsible for the child or where the child is living with one parent, other relatives, or friends of the family, the child is considered to be a member of the household with whom he or she resides. Children of divorced or separated parents are generally part of the household that has custody.
- e. **Emancipated Child**—A child living alone as a separate economic unit is considered to be a household of one. **No portion of a social security number is required on an application of an emancipated child.**
- f. **Family Members Living Apart**—Family members living apart on a temporary basis are considered household members. Family members not living with the household for an extended period of time are not considered members of the household for purposes of determining eligibility, but any money made available by them or on their behalf for the household is included as income to the household.
- g. **Foreign Exchange Student**—A foreign exchange student is considered to be a member of the household in which he or she resides; i.e., the household hosting the student.
- h. **Foster Child**—A foster child is a child whose care and placement is the responsibility of an agency that administers a state plan under Part B or E of Title IV of the Social Security Act or a foster child who the court has placed with a caretaker household. These provisions only apply to children formally placed in foster care by a state child welfare agency or a court. They do not apply to informal arrangements such as caretaker arrangements or permanent guardianship placements that may exist outside of or as a result of state- or court-based systems. Whether placed by the state child welfare agency or a court, in order for a child to be considered categorically eligible for free meals, the state must retain legal custody of the child. The household keeping the foster child **DOES** include the foster child in its family size, and it does include as part of the household income any monies the foster child receives. However, the household does not report any monies the foster parents are receiving for the care of the foster child. **NOTE: Because some adopted children were first placed in families as foster children, parents may not be aware that once a child is adopted, he or she must be determined eligible based on the economic unit and all income available to that household, including any adoption assistance, is counted when making an eligibility determination.** (Reference USDA Memo SP-17-2011)
- i. **Homeless**—An individual who lacks a fixed, regular, and adequate nighttime residence is considered homeless. The LEA must consider the following: Can the student go to routine or consistent (regular) place (fixed) to sleep in a safe and sufficient space (adequate). The definition includes:
  - (1) Children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative accommodations; living in emergency or transitional shelters; abandoned in hospitals; or awaiting foster care placement.
  - (2) Children and youths who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings.
  - (3) Children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.
  - (4) Migratory/runaway children who qualify as homeless because the children are living in circumstances described on **page E-19** Section F Item #2.

**NOTE: The definition of homeless does not include students of divorced parents when the**

*student spends part of the time with each parent. Reference Item l for the definition of joint custody.*

- j. **Household/Economic Unit**—A group of related or unrelated individuals who are not residents of an institution or boarding house, but who are living as one economic unit and who share housing and/or significant income and expenses of its members. Generally, individuals residing in the same house are an economic unit. However, more than one economic unit may reside together in the same house. Separate economic units in the same house are characterized by prorating expenses and maintaining economic independence from one another.
  - k. **Institutionalized Child**—An institutionalized child is a child who resides in a residential-type facility that the state has determined is not a boarding school. Such a child is considered a household of one.
  - l. **Joint Custody**—In cases where joint custody has been awarded and the child physically changes residence, the SFA has the authority to assign the child’s eligibility to the household that best benefits the child. This eligibility does not extend to members of the second household.
  - m. **Military Family Member**—For the purpose of determining household size, deployed service members should be considered as family members living apart on a temporary basis. A school or an institution would instruct families to include the names and only that portion of the deployed service member’s income made available by the service member, or on his or her behalf, to the household where the children are staying should be counted as income for eligibility determination purposes.
2. Determining Reportable Household Income

a. Reportable Income

- (1) Income is any money received on a recurring basis, including **GROSS** earned income, unless specifically excluded by legislation. Specifically, gross earned income means all money earned before deductions for employee’s income taxes, social security taxes, insurance premiums, bonds, savings programs, and/or other income deductions.
- (2) Income includes the following:
  - (a) **Adopted Child Subsidy**—The subsidy a household receives for a child who has been adopted is counted as income.
  - (b) **Alimony and Child Support**—Any money received by a household in the form of alimony or child support is considered as income to the receiving household. However, any money paid out for alimony or child support may not be deducted from that household’s reported gross income.
  - (c) **Child’s Income**—The earnings of a child who is a full-time or regular part-time employee **MUST** be listed on the application as income. However, occasional earnings such as income from occasional baby-sitting or mowing lawns should not be listed on the application as income.
  - (d) **Current Gross Income**—Households **MUST** report current income (before taxes) on a free and reduced-price meal application.

**Current income** means income received by the household. For the purposes of certification of eligibility for free or reduced-price meals or free milk, the household must provide its current income which is based on the most recent information available. This may be for the current month, the amount projected for the first month the application is made for, or for the month prior to application. If the household’s current income is not a reflection of income that will be available over the school year, the household should contact the SFA for assistance. The SFA would determine the amount and frequency of income available during the school year for households.

- (e) **Earnings From Work**—Wages, salaries, tips, commissions, net income from self-owned businesses and farms, strike benefits, unemployment compensation, and workers’ compensation.
- (f) **Foster Child’s Income**—A foster child is a child who is living with a household but who remains the legal responsibility of the welfare agency or court. The house-



hold keeping the foster child **DOES** include the foster child in its family size, and it does include as part of the household income any monies the foster child receives. However, the household, does not report any monies the foster parents are receiving for the care of the foster child. **NOTE: Because some adopted children were first placed in families as foster children, parents may not be aware that once a child is adopted, he or she must be determined eligible based on the economic unit and all income available to that household, including any adoption assistance, is counted when making an eligibility determination.**

- (g) **Garnisheed Wages and Bankruptcy**—Income is the gross income received by a household before deductions. In the case of garnisheed wages and income ordered to be used in a specified manner, the total gross income **MUST** be considered, regardless of whatever portions are garnisheed or used to pay creditors.
  - (h) **Income for the Self-Employed**—Self-employed persons may use last year’s income as a basis to project their current year’s net income, unless their current net income provides a more accurate measure. Self-employed persons are credited with net income rather than gross income. Net income for self-employment is determined by subtracting business expenses from gross receipts.
    - 1) Gross receipts include the total income from goods sold or services rendered by the business.
    - 2) Deductible business expenses include the cost of goods purchased, rent, utilities, depreciation charges, wages, and salaries paid, and business taxes (not personal, federal, state, or local income taxes).
    - 3) Nondeductible business expenses include the value of salable merchandise used by the proprietors of retail businesses.
    - 4) For a household with income from wages and self-employment, each amount **MUST** be listed separately. When there is a business loss, income from wages may not be reduced by the amount of the business loss. If income from self-employment is negative, it should be listed as zero income.
  - (i) **Institutionalized Child’s Income**—Payments from any source directly received by the institution on a child’s behalf are not considered as income to the child. Only the income a child earns from full-time or regular part-time employment and/or personally receives while in residence at the institution is considered as income.
  - (j) **Lump Sum Payments**—When lump sum payments are put into a savings account and the household regularly draws from that account for living expenses, the amount withdrawn is counted as income.
  - (k) **Military Benefits**—Gross income, including base pay, regular housing allowance (BAH, VHA, BAQ), subsistence (BAS), clothing allowance, hazardous duty, hostile fire, flight pay, incentive, etc., must be included for military families. The only exceptions are as follows:
    - 1) **U.S. Armed Forces Family Subsistence Supplemental Allowance (FSSA)**. (Reference USDA Policy Memo 2006-CN-10)
    - 2) **Privatized housing** refers to the Military Housing Privatization Initiative, a program operating at a number of military installations. This initiative puts the operation of military-owned housing under private contractors. Under this privatization initiative, a housing allowance appears on the leave and earnings statement of service members living in privatized housing. It is important to note that this income exclusion is only for service members living in housing covered under the Military Housing Privatization Initiative. It is not an allowable exclusion for households living off base in the general commercial/private real estate market.
    - 3) During **Operation Enduring Freedom**, where a household member is deployed to any location, regardless of the specific military operation, only the income made available to the household is to be counted and the deployed household member is to be counted as part of the household. (Reference USDA Policy Memo 2003-CN-06)
- Additionally, USDA has provided clarification regarding household-size and

income determination where both parents are deployed military and their children are staying with friends or relatives. Consistent with the above policy, the children would be counted as part of the household where they are staying; however, both parents would also be included in the household and only the funds provided to the household by the deployed military parents would be included in total household income.

- 4) ***Military Combat Pay***. This exclusion is authorized by the Agriculture, Rural Development, Food and Drug Administration, and Related Agencies Appropriations Act, 2010 (P.L. 111-80, October 21, 2009).

As set forth in the statute, combat pay is defined as an additional payment made under Chapter 5 of Title 37 of the United States Code, or as otherwise designated by the Secretary to be excluded, that is received by the household member who is deployed to a designated combat zone. Combat pay is excluded if it is:

- Received in addition to the service member's basic pay.
- Received as a result of the service member's deployment to or service in an area that has been designated as a combat zone.

***AND***

- Not received by the service member prior to his or her deployment to or service in the designated combat zone.

A combat zone is any area that the President of the United States designates by Executive Order as an area in which the U.S. Armed Forces are engaging or have engaged in combat. As with other types of income commonly received by military personnel (such as the Basic Allowance for Housing or Basic Allowance for Subsistence payments), combat pay received by service members is normally reflected in the entitlements column of the military Leave and Earning Statement (LES). Information regarding deployment to or service in a combat zone may also be available through military orders or public records on deployment of military units. Deployed service members are considered members of the household for purposes of determining income eligibility for the CNP. (Reference USDA Memo SP-06-2010)

- 5) ***Deployment Extension Incentive Pay (DEIP)***

The exclusion of combat pay, as described in P.L. 111-80, is extended to DEIP. DEIP is given to active-duty service members who agree to extend their military service by completing deployment with their units without reenlisting. This exemption applies only until the service members return to their home station. Any additional DEIP payments provided to service members serving at their home station is considered income as they are no longer considered deployed. (Reference USDA Policy Memo SP-06-2011)

- 6) ***The Earned Income Tax Credit (EITC)***. (Reference USDA Policy Memo 2003-CN-13)

- 7) Any payments made under the ***Agent Orange Compensation Exclusion Act***.

- 8) Any payments made or any mandatory salary reduction related to the ***Veteran's Educational Assistance Act of 1964 (GI Bill)***.

- (l) ***Other Income***—Net rental income; annuities; net royalties; disability benefits; interest; dividend income; cash withdrawn from savings; income from estates, trusts, and/or investments; regular contributions from persons not living in the household; any other money that may be available to pay for the children's meals.
- (m) ***Pensions/Retirements/Social Security***—Pensions, retirement income, social security, supplemental security income (SSI), and veterans' payments.
- (n) ***Seasonal/Temporary Workers***—Seasonal workers such as migrants and others whose income fluctuates so that they usually earn more money in some months than in other months. In these situations, the household may project its annual rate of income and report this amount as its current income. If the prior year's income provides an accurate reflection of the household's current annual rate of income, the prior year may be used as a basis for the projected annual rate of income.

- (o) **Welfare**—Public assistance payments/welfare receipts (General Assistance, General Relief, etc.).
- b. **Income Exclusions**—Income *NOT* to be reported or counted as income in the determination of a household’s eligibility for free or reduced-price benefits includes:
  - (1) Any cash income or value of benefits a household receives from any federal program that excludes such income by **legislative prohibition**, such as the value of assistance provided under SNAP, TANF, or FDPIR benefits.
  - (2) **Student financial assistance** provided for the costs of attendance at an educational institution, such as grants and scholarships, awarded to meet educational expenses and not available to pay for meals.
  - (3) The foster parent does not include as part of the household income any monies the foster parent receives from the welfare agency for shelter and care.
  - (4) **LOANS**, such as bank loans, since these funds are only temporarily available and **MUST** be repaid.
  - (5) The value of **in-kind compensation** such as housing for clergy and any other noncash benefit.
  - (6) **Occasional earnings** received on an irregular basis; e.g., nonrecurring, such as payment for occasional baby-sitting, mowing lawns, or overtime pay that is not consistently received.
  - (7) Lump sum payments or large cash settlements are not counted as income since they are not received on a regular basis. These funds may be provided as compensation for a loss that **MUST** be replaced, such as payment from an insurance company for fire damage to a house.
  - (8) Any subsidy that a household receives through the prescription drug discount card program is not considered income. (Reference USDA Policy Memo 2004-CN-04)
  - (9) Military exclusions—see **page E-26-27**.
  - (10) Earned Income Tax Credit: The federal earned income tax credit may be a refund of taxes withheld, a credit toward taxes withheld, or a cash payment in excess of what was withheld. (Reference USDA Policy Memo 2003-CN-13)
  - (11) Payments made under the National Flood Insurance Act of 1968 for flood mitigation activities. (Reference USDA Policy Memo 2006-CN-04)

***This list is not inclusive.*** Legislation is periodically enacted that excludes income for the purposes of the school meals/milk programs. Go to <http://www.ssa.gov/OPHome/cfr20/416/416-ap01.htm> for a complete listing.

## O. Eligibility of Preprimary Children

### 1. Head Start

- a. Children enrolled in a **FEDERALLY** funded Head Start **AND** enrolled in the school district are considered categorically eligible for free meals no matter what the income level of the household. Public Law 110-134 makes any child enrolled in a federally-funded Head Start automatically eligible for free meals without further application or eligibility documentation. (Reference USDA Policy Memo SP-40-2013) The following documentation is needed for meeting this criteria:
  - (1) **Documentation for Head Start Enrollees**—The SFA must obtain documentation of the Head Start participants in order to confirm automatic eligibility for free meals. The documentation may be a list of the names of the Head Start participants. The documentation must also include the signature of a Head Start employee authorized to provide the certification on behalf of the Head Start office, as appropriate, and the date. Verification of eligibility from the household is not required when documentation of categorical eligibility is obtained from Head Start officials. Refer to **page E-65** for a copy of the Even Start/Head Start **Federally** Funded Enrollment form.
  - (2) **Annual Update**—At the beginning of each year, the determining official must establish whether each child continues to be enrolled in Head Start. Carryover of the eligibility

status from the previous year also applies to children in Head Start programs **IF** the SFA administers both the Head Start program and the school in which the child attends kindergarten.

- (3) **Record Retention**—The Head Start list of participants must be maintained on file and readily available for review by USDA, the State agency, or other appropriate agencies for a minimum of three years from the end of the fiscal year to which the information applies or as otherwise specified in program regulations.
- b. Head Start children **MUST** be enrolled in the school district in order to claim meals on the NSLP/SBP. All enrolled children can be counted in the school’s free and/or reduced-price eligible count.
- c. The categorical eligibility of a Head Start child does **NOT** extend to the other children in the household.

## 2. Even Start

For a child to be categorically eligible for free meals based on his or her participation in Even Start, the child **MUST** be enrolled as a participant in a **FEDERALLY** funded Even Start Family Literacy Program, **MUST** be at the prekindergarten level, and **MUST** be enrolled in the school district.

- a. Categorical eligibility does **NOT** apply to other family members.
- b. **Documentation for Even Start Enrollees**—The SFA must obtain documentation of the Even Start participants. The documentation may be a list of the names of the Even Start participants and a statement certifying that those children are currently enrolled as participants in the Even Start program. The documentation must also include the signature of an Even Start employee authorized to provide the certification on behalf of the Even Start office, as appropriate, and the date. Verification of eligibility from the household is not required when documentation of categorical eligibility is obtained from Even Start officials. Refer to **page E-65** for a copy of the Even Start/Head Start **Federally** Funded Enrollment form. Confirmation that the child has not yet entered kindergarten must also be included in the documentation from the Even Start official. **Once a child has entered kindergarten, that child loses his or her categorical eligibility for free meals based upon Even Start.**
- c. **Recertification of Categorical Eligibility**—At the beginning of each year, the official responsible for determining Even Start participation must update each child on the list to ensure each one has not entered kindergarten.
- d. Meal Requirements for Adults Participating in Even Start
  - (1) Reimbursements may be claimed for adults participating in Even Start programs when the adults are enrolled in a General Educational Development (GED) program that meets in the school during the school day. GED students are not enrolled in the school; thus, they cannot be counted in the school’s free and/or reduced-price eligible counts. **NOTE: If the adult is not enrolled in a daytime GED program, he or she should be treated as a visitor.**
  - (2) In the case where the adult student is enrolled in a school of high school level or under (not in a GED program), meals served may be claimed for reimbursement. The adult student would be included in the SFA’s total enrollment of students for funding and other purposes the same as other students of high school level or under. Any adults meeting either of these criteria who wish to obtain free or reduced-price benefits under the NSLP/SBP must complete an application for meal benefits.
  - (3) If an adult is enrolled in only English as a Second Language (ESL) classes that are not part of a regular high school completion program, he or she should be treated as a visitor.

## 3. Preprimary

**Preprimary** is defined as a child or group of children ranging from birth to school age. Preprimary children are **NOT** eligible to participate in NSLP and SBP. If these children are **NOT** enrolled in the school district, the meals **cannot** be claimed. They are not be reported on the site’s free and/or reduced-price eligible counts on the claim for reimbursement, and cannot be added to the Low-Income

Student Count Report.

**NOTE: The only three-year-olds enrolled in a district are those with an IEP or 504 plan as they are receiving services. (Reference FNS Instruction 776-7, Rev. 1, 6/6/88)**

1. Allowable preprimary options:

- The district can participate in the Regular CACFP program and claim meals for reimbursement. *(Note: These children cannot be claimed on At-Risk as that program is only allowed for school age children, and meals can only be served after the school day has ended.)*
- Preprimary meals can be paid for out of General Fund. If the district pays for all or a portion of preprimary meals. The district needs to keep track of how much is owed to Child Nutrition. A Preprimary Lunch and Breakfast Cost form which is located in Other Documents.
- The district can bill the parents the adult/contract price listed in Schedule B in the online application and agreement.
- Head Start and Even Start children who are not enrolled in the school district **cannot** be claimed. The school can bill the Head Start/Even Start for contract meals.
  - It is required by the federal government for Head Start/Even Start programs participate in the Regular CACFP program. The district can bill the Head Start/Even Start program for all reimbursable meals served, and the Head Start/Even Start program will claim these meals directly with Child Nutrition.

## DIRECT CERTIFICATION (Reference page 65 of USDA Eligibility Manual—2017)

A. Direct Certification is a simplified method of determining some children’s eligibility for free meals under the NSLP, SBP, or free milk under the SMP without having the family complete a free and reduced-price meal application or a free milk application. **NOTE: All LEAs MUST participate in Direct Certification.**

1. All students’ eligibility status must be recorded in the State agency Student Information System—the WAVE.
2. The WAVE identifies each student as follows:

|    |                                                                                                                                                                                                                                                                     |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 01 | Identified through Direct Certification—SNAP only                                                                                                                                                                                                                   |
| 02 | Identified as foster child (not subject to verification)—Foster child who was directly certified                                                                                                                                                                    |
| 03 | Identified as foster child (categorically eligible)—Foster child who was NOT directly certified                                                                                                                                                                     |
| 04 | Identified through homeless/migrant/runaway liaison list—Directly certified                                                                                                                                                                                         |
| 05 | Identified through income-eligible Head Start—Directly certified                                                                                                                                                                                                    |
| 06 | Identified through Even Start                                                                                                                                                                                                                                       |
| 07 | Identified as residential students in RCCIs                                                                                                                                                                                                                         |
| 08 | Identified as nonapplicants approved by local officials                                                                                                                                                                                                             |
| 09 | Identified based on SNAP/TANF/FDPIR case number submitted on an application (categorically eligible)                                                                                                                                                                |
| 10 | Identified based on income/household size information submitted on an application ( <i>do not include foster children</i> )                                                                                                                                         |
| 12 | Identified through Direct Certification—TANF only                                                                                                                                                                                                                   |
| 13 | Identified through Direct Certification—FDPIR only                                                                                                                                                                                                                  |
| 14 | Identified as homeless/migrant/runaway based on application (not directly certified)                                                                                                                                                                                |
| 15 | Identified as directly certified other (do not include these categories: SNAP, TANF, FDPIR, foster, homeless, migrant, runaway, Head Start, Even Start)                                                                                                             |
| 16 | Identified through Direct Certification - Medicaid (This does not override SNAP or TANF)                                                                                                                                                                            |
| OT | Identified in some other way other than listed above. <b>OSDE does not expect to receive code OT for Lunch Eligibility Determination. This code is reserved for emergency legislative updates or mid-year policy changes and is not valid for any other reason.</b> |
| NA | The student is NOT eligible for free or reduced-price lunch (Does not qualify for free or reduced-price eligibility)                                                                                                                                                |

### B. Direct Certification Through the WAVE

1. The WAVE is Oklahoma’s secure electronic student information system (SIS). There is a mandatory element in the SIS where a district must indicate whether a student qualifies for free, reduced-price, or no (paid) meal benefits. Although this is confidential information, other elements in the SIS are also confidential. Therefore, meal-eligibility information must be entered into the SIS or provided to SIS staff in some manner. Log onto **The WAVE located in Single Sign-on or at <https://sde.ok.gov/wave-system> or contact [studentdatainfo@sde.ok.gov](mailto:studentdatainfo@sde.ok.gov)**
2. To provide better service to school districts across the state, Direct Certification is being conducted through the WAVE. The reports contain students who have enrolled in the district, either this year or at the end of last school year, who are directly certified. The list of students pulled from these reports will automatically receive **FREE** meal benefits. A **Direct Certification Application Manual** containing instructions for using this application is provided on the WAVE Web site.

3. Once the list of students is obtained, each district is required to send a written notice to each household that has students identified as being directly certified, even if nonpricing school. Refer to **page E-66** for a copy of the Notice of Direct Certification form. If not using the USDA prototype, the SFA must send a copy to the State agency for approval. Once the notice is sent, the district may begin claiming every meal served to these students at the free reimbursement rate. There is also a list of students (Remaining Records) that may be accessed that were not identified through the WAVE's matching process, but who receive SNAP benefits. If a student is found on the list enrolled in the school district, go ahead and directly certify him/her and all of the other children within that same household. As new students enter the district and receive a Student Testing Number (STN), check these reports to find out if the new student is directly certified. The WAVE will update this information nightly so that students may be readily identified upon enrollment. If information is received on a student from another district and Direct Certification information did not come with the student's transfer papers or the student is received before the records arrive, check the WAVE Web site to ensure that every child possible is identified.
  
4. The first Direct Certification report should be created at the beginning of the school year. No modifications are made to this report. It is the first match made by the WAVE with the Department of Human Services (DHS) data. This report is available the second business day in August, barring any computer issues. DHS Direct Certification information is then updated the first business day of every month for the rest of the year. All students contained in this report are a Direct Certification Match.
  - a. Reports
    - (1) **Full Report**—This report shows students who are directly certified for free lunch for this entire current school year. It displays students directly certified in the match process conducted by the WAVE and will display data based on the filters you will provide.
    - (2) **Full Report Address and Case Number**—This report shows students who are directly certified for free lunch for this entire current school year. This report is best viewed when exported to an Excel format as it contains a large amount of data. From Excel, you can modify the report and use only the data you need. If the data is blank or empty, it is because that data was not supplied to the WAVE by DHS. It will display students directly certified in the match process conducted by the WAVE and will display data based on the filters you will provide.
    - (3) **Eligible First 30 Days**—This report will show all students, based on the filters provided by the user, who currently only qualify for free lunch for the first 30 days of school. They qualify because they were directly certified last school year but are not presently directly certified for this school year. **NOTE: A student can drop from this list and move to the Full Report if they qualify for the appropriate services from DHS again.**
    - (4) **Eligible First 30 Days Address and Case Number**—This report will show all students, based on the filters you provide, who currently qualify for free lunch for the first 30 days of school (see Eligible First 30 Days description). This report is best viewed when exported to an Excel format as it contains a large amount of data. From Excel, you can modify the report and use only the data you need. If the data is blank or empty, it is because that data was not supplied to the WAVE by DHS.
    - (5) **Remaining Records**—This contains all of the records by zip code for which the WAVE was unable to find a direct match. With this file, you will need to search for students to directly certify using your own match criteria and your own student level data. This file may increase or reduce in size depending on the number of records the WAVE is able to match nightly.
  - b. Filters
    - (1) **Select Student Filter**
      - (a) All matched students for this report—Provides every student found in the current database who matches the DHS Direct Certification and meets the criteria of the report you select.  
**NOTE: This may contain data on students from the previous school year until September 30.**

- (b) All matched students who have attended this school year for this report—Provides every student in the WAVE who matches the DHS Direct Certification data and attended your district at some point during this current year and who meets the criteria of the report you select.
- (c) All matched students without an enrollment for this school year for this report—Provides every student in the WAVE who matches the DHS Direct Certification but who does **NOT** yet have an enrollment in the WAVE at your school district at some point during this school year and who meets the criteria of the report you select. This filter is available only until September 30 of each year to make sure all data has time to process into the WAVE from school districts and allows you to identify students who qualify prior to the start of school.
- (d) Only currently attending matched students for this report—Provides every student found in the WAVE who matches the DHS Direct Certification data and is shown to be currently attending your school district/site based on enrollment information sent from Student Information System and who meets the criteria of the report you select.

(2) **Match Date Filter**

- (a) All Records—Provides every matched record regardless of the data to which it was matched. **NOTE: The Match Date will update only once during each school year. It will show the first time the student is matched for that particular year.**
- (b) Only records matched on this date—Provides every record matched new on the date supplied.
- (c) Only records matched on or before the following dates—Provides every record that matched new on or between the dates supplied.

5. The WAVE will generate a report that will show students who have the same address of a student that has been directly certified. The LEA will need to verify the information, and when it is accurate, also directly certify these students.
6. The Data Validation Wizard validates the actual codes being supplied by the school districts.

C. Direct Certification for Other Programs

1. Direct Certification: FDPIR Listing

- a. SFAs may request or accept a listing provided by tribal authorities indicating households that participate in the FDPIR or other food assistance program.
- b. Upon receipt of the information, it is the responsibility of the SFA to compare each child enrolled in the SFA, using at least two identifying pieces of information; i.e., name of child, social security number, birth date, name of parent or legal guardian, or sex. When a child matches on at least two identifying pieces of information, the child automatically qualifies for free meal benefits. In addition, any other children within the same household who are enrolled in school will also qualify for free meal benefits. The SFA should identify the children on the Direct Certification list who are enrolled in the SFA along with any other children identified as part of that household who are enrolled. An example of this would be highlighting each child's name on the list that matches the SFA's enrollment. The SFA must then notify the parent or legal guardian of the child's/children's eligibility.
- c. An SFA may also receive a notice from a tribe that a particular household receives FDPIR benefits. Upon receipt of this type of form, the SFA can automatically certify the children listed as well as the other children within that household who are enrolled in school as being directly certified to receive free meal benefits..

2. Direct Certification: Foster Children

If the SFA can obtain a list of foster children who are enrolled in its district from the local DHS foster care office, these children can then be counted on the SFA's certification list.



3. Direct Certification: Medicaid Children
  - a. Medicaid information used to qualify students can **ONLY** be pulled from *The WAVE located in Single Sign-on or at <https://sde.ok.gov/wave-system>*
    - *A letter from the portal or from the family CANNOT be accepted for benefits*
  - b. *The child is approved for either Free or Reduced-priced depending on what it states on the Direct Certification Report*
    - Medicaid benefits are extended to other children living in the household.
  - c. SNAP/TANF/FDPIR benefits supercede Medicaid benefits

#### D. Frequency of Direct Certification

1. LEAs must conduct Direct Certification at least three times during the school year. More frequent Direct Certification efforts are permissible and encouraged. The efforts must be made:
  - At or around the beginning of the school year.
  - Three months after the beginning of the school year.
  - Six months after the beginning of the school year.

**Note:** Schools who are district-wide Provision 2, 3, or CEP are required to pull the Direct Certification list at least one time per year. It is recommended to pull it in April if you have any sites on CEP.

Because the WAVE enables LEAs to do Direct Certification so easily, most do Direct Certification every day or at least weekly. SNAP and TANF information from DHS is updated at the first of every month.

2. Subsequent Direct Certification efforts are required for children who were not initially directly certified and who are currently reduced-price or paid. This can be done through the WAVE. If the LEA has the capability, the status of any new enrolled child must be checked for SNAP eligibility at the time of enrollment. If this is not possible, the household must be provided with an application so that the child's benefits are not delayed until the next scheduled Direct Certification update.
3. LEAs may consider the effective date of eligibility for free school meal or milk benefits to be the date of the automated data matching file (or benefit recipient file from another agency) which first identifies the student as eligible for Direct Certification, rather than the date the LEA accesses and processes the automated data matching file into its local point-of-service (POS) system. To be used for this purpose, the data file must have been generated and received by the LEA **in the current school year**. (Reference USDA Policy Memo SP-51-2014)
4. Under Direct Certification, if one child in the household is directly certified, then all children in that household who are enrolled in the school must be given free meal benefits. (Reference SP-38-2009)
5. If an application for directly certified children is received at any time during the school year, the school should disregard the application. The Child Nutrition and WIC Reauthorization Act of 2004 states that once a household is approved for free or reduced-price benefits, the household will remain eligible for those benefits for the remainder of the school year plus a maximum of 30 operating days in the subsequent school year. Also, the family is no longer required to report income increases; loss of SNAP, TANF, or FDPIR eligibility; or family-size reductions. (Reference USDA Policy Memos 2004-CN-07, 2004-CN-09, 2004-SP-02, and 2004-SP-03)
6. The documentation **MUST** be retrievable by school to ensure proper delivery of benefits and to allow substantiation of the number of children eligible for free meals or milk.

## 7. Delivery of Benefits

- a. The SFA **MUST** provide benefits promptly. Eligible students may receive benefits immediately, and the SFA may assume consent if refusal has not been received by a certain number of days as determined by the SFA.
- b. If the household refuses benefits, the SFA **MUST** discontinue benefits immediately and document the refusal.

# CONFIDENTIALITY/DISCLOSURE OF ELIGIBILITY INFORMATION

(Reference page 83 of USDA Eligibility Manual—2017)

## A. General Information

1. The issues of privacy and confidentiality of personal data are complicated as well as sensitive. SFAs may disclose children's free or reduced-price meal eligibility information to programs, activities, and individuals who are specifically authorized access under the NSLA. This is an option, not a requirement; therefore, funds in the nonprofit school food service account cannot be used to pay the costs associated with collecting and processing such information.
2. The eligibility status of a child by a noncustodial parent must not be released without a court order.
4. The SFA or the school administration may opt to disclose children's eligibility information to Sooner Care Benefits' officials if the household does not decline to have its children's eligibility information released. The Oklahoma Health Care Authority (which administers the Sooner Care Benefits Program) receiving children's free and reduced-price meal or free milk eligibility information **MUST** use that information to enroll eligible children in the Sooner Care Benefits Program.
5. The SFA may disclose aggregate information to any program or individual, such as the number of children eligible for free or reduced-price meals. Information in the aggregate does not identify individual children. Therefore, parental notification and parental consent are not needed.
6. The NSLA specifies that persons directly connected to the administration or enforcement of certain programs or activities are permitted to have access to children's eligibility information. The Disclosure Chart for Eligibility Information on [page E-67](#) lists programs, the extent of information that may be disclosed (only eligibility status or all eligibility information), and whether the program may have access to children's eligibility information without parental consent or without the opportunity to decline the disclosure.
7. Although a program or person may be authorized under the NSLA to receive free and reduced-price eligibility information, there **MUST** be a legitimate need to know to provide a service or carry out an authorized activity.
8. Every Student Succeeds Act (ESSA)—Because ESSA is the nation's federal education law, school district officials may disclose a child's eligibility status to persons directly connected with, and who have a need to know, a child's free or reduced-price meal eligibility status in order to administer and enforce ESSA requirements. However, other information obtained from a free and reduced-price meal application or obtained through Direct Certification cannot be disclosed. School district officials must keep in mind that the intent of the confidentiality provisions is to limit the disclosure of a child's eligibility status to those who have a **need to know** for proper administration and enforcement of a federal education program. School districts must establish procedures that limit access to a child's eligibility status to as few individuals as possible.

## 9. National Assessment of Education Progress (NAEP)

- a. LEAs may disclose, without parent/guardian consent, children's names and eligibility status to persons who are directly connected to the administration or enforcement of NAEP because NAEP is a federal education program. Additionally, LEAs may disclose children's names and eligibility status to persons directly connected with the administration or enforcement of state educational assessment programs to the extent that the state assessment is part of the NAEP or the assessment program is established at the state, not local, level. Other state education programs also are eligible to have access to participants' names and eligibility status, without parent/guardian consent, but the program must be established at the state, not local, level.
- b. The term *persons directly connected* for the purpose of disclosure to NAEP includes federal, state, and local program operators responsible for NAEP program administration or program compliance and their contractors. This does not imply that these persons have routine access to participants' eligibility status. There must be a *need to know* for legitimate NAEP purposes.
- c. LEAs are encouraged to inform households when they plan to disclose or use eligibility information outside the originating program and to have a written agreement with NAEP officials.

## 10. Family Educational Rights and Privacy Act (FERPA)

The federal Department of Education has established that education records are under the purview of FERPA. However, for school meals and milk programs, the restrictions imposed by the laws governing these programs apply, not FERPA.

### B. Need to Know Basis

1. The LEA may disclose children's eligibility status only to persons determined to be *directly connected* with the administration or enforcement of a federal education program, state education program, state health program, or a means-tested nutrition program, as well as to persons directly connected with the Comptroller General Office or law enforcement for an authorized activity.
2. Although a program or person may be authorized to receive free and reduced-price eligibility information, there must be a legitimate *need to know* to provide a service or carry out an authorized activity. State agencies, LEAs, and schools must ensure that data systems, records, and other means of accessing a student's eligibility status are limited to officials directly connected with administration or enforcement of a federal or state program or activity. This includes federal, state, or local program operators responsible for the ongoing operation of the program or activity or responsible for program compliance.
3. Eligibility information cannot be made available to all school officials. For example, access must be limited to a student's teachers who are directly responsible for the administration of a federal education program (e.g., NCLB) or who are providing tutorial or other assistance under such a program. Teachers, guidance counselors, principals, etc., who *are not* providing such assistance under the appropriate statutory or regulatory requirements cannot have access. Online data systems must have masking or deidentification capability to prevent unauthorized access to free or reduced-price eligibility status.

### C. Parental Notification for Disclosure

1. Unless otherwise indicated, SFAs should inform households if they plan to disclose or use eligibility information outside the originating program (i.e., disclosure to a means-tested federal or state nutrition program, federal education program, law enforcement, the United States Comptroller General for audit purposes, or other child nutrition programs).
  - a. The notice of potential disclosure is in the Letter to Household that accompanies the free and reduced-price meal application or free milk application; on the application; or for children directly certified in the document informing households of the participants' eligibility through

Direct Certification.

- b. The notification should state that the children’s names, eligibility status, and other information provided on the application or obtained through Direct Certification may be disclosed to certain other federal, state, or local agencies as authorized by the NSLA.
2. Parents or guardians **MUST** be notified of the potential disclosure and given the opportunity to elect **NOT** to have their children’s information disclosed in certain cases (i.e., Federal Education Program).
    - a. The notification **MUST** inform the parents or guardians:
      - (1) They are not required to consent to the disclosure.
      - (2) The information will be used to facilitate the enrollment of eligible children in a health insurance program.
      - (3) Their decision will not affect their children’s eligibility for free or reduced-price meals or free milk.

#### D. Agreements/Memorandum of Understanding

1. An agreement is not needed for federal, state, or local agencies evaluating or reviewing CNP operations. Similarly, an agreement is not necessary for disclosure to the Comptroller General. These activities are part of routine CNP operations and enforcement.
2. Non-Medicaid Sooner Care Agencies: The SFA should enter into a written agreement (refer to the Disclosure of Free and Reduced-Price Information Agreement form on **page E-68-70**) with other entities, including NAEP, requesting the information prior to disclosing children’s eligibility information. The agreement must:
  - a. Be signed by both the SFA and receiving entity.
  - b. Identify the entity receiving the information.
  - c. Describe the information to be disclosed and how it will be used. Eligibility information may only be used for the purpose for which the disclosure was made.
  - d. Describe how the information will be protected from unauthorized uses and disclosures. Further use or disclosure to other parties is prohibited.
  - e. Describe the penalties for unauthorized disclosure. A violation of this provision may result in a fine of not more than \$1,000 or imprisonment of not more than one year, or both.
3. Medicaid/Sooner Care Agencies
  - a. For any disclosures to Medicaid or Sooner Care agencies, the LEA and receiving agency must have an agreement or Memorandum of Understanding that includes:
    - Health insurance program or health agency receiving child’s eligibility information.
    - Information that will be disclosed, specifying that the information must only be used to seek to enroll children in state Medicaid or Sooner Care.
    - How the information will be used and how it will be protected from unauthorized uses and disclosures.
    - Penalties for unauthorized disclosure.
    - Signature of the determining agency and the state Medicaid/Sooner Care or agency receiving the children’s eligibility information.
  - b. In all cases, the receiving entity must be informed in writing that:
    - Eligibility information may only be used for the purpose for which the disclosure was made.
    - Further use or disclosure to other parties is prohibited.
    - A violation of this provision may result in a fine of not more than \$1,000 or imprisonment of not more than one year, or both.

#### 4. Other Disclosures That Require Parental Consent

- a. Parents or guardians may always provide consent for the disclosure of any or all of the information related to their children’s eligibility status (i.e., whether children are eligible for free or reduced-price meals) or the information that the household provided through the free and reduced-price meal eligibility process. In addition, parents or guardians may request release of information to programs. The LEA must obtain written consent signed by a parent or guardian that follows the guidelines below.
- b. A disclosure to any other federal, state, or local program or individual not included in the NSLA requires parental consent. Other programs that require parental consent are local health and local educational programs and other local-level activities. For example, the disclosure of children’s eligibility for free or reduced-price meals to determine children’s eligibility for free textbooks or reduced-price fees for summer school requires consent when these are local initiatives and not state programs.
- c. The disclosure of information other than names and eligibility status to the programs authorized only to receive participants’ names and eligibility status also requires written consent. For example, determining agencies may disclose names and eligibility status to a federal education program, but if the program requests family size, determining agencies **MUST** obtain consent prior to disclosure.

#### 5. Consent Statement Requirements

- a. The consent statement **MUST** be in writing. It may be obtained at the time of application or at a later time.
- b. The consent statement must:
  - Be obtained each school year, and consent forms cannot be extended from one school year to the next. (Reference page 91, USDA Eligibility Manual—2017)
  - Identify the information that will be shared and how the information will be used.
  - Be signed and dated. In the case of a child participant, the consent statement **MUST** be signed by the parent or guardian of the applicant’s household, even though the free and reduced-price meal application or free milk application may be signed by any adult household member.
  - State that failing to sign the consent statement will not affect eligibility or participation for the program and that the information will not be shared by the receiving program with any other entity or program.
  - Enable the parent/guardian to limit consent to only those programs with which he or she wishes to share information. For example, the consent statement could use a checkoff system under which the applicant would check or initial a box to indicate that he or she wants to have information disclosed to determine eligibility for benefits from a particular program.

6. Requirements for Social Security Numbers: The free and reduced-price meal application requires the last four digits of the social security number of the adult household member who signs the application.

## **VERIFICATION OF ELIGIBILITY** (Reference page 96 USDA Eligibility Manual—2017)

### A. General Information

#### 1. Definitions

- a. **Verification** is confirmation of eligibility for free and reduced-price meals under the NSLP and SBP. Verification is only required when eligibility is determined through the application process, not through Direct Certification conducted with an Assistance Program or officials or agencies that documented Other Source Categorical Eligibility. Verification must include other confirmation of income eligibility or confirmation that the child or any member of the household is receiving assistance under SNAP, TANF, or FDPIR, or that a child is Other

- Source Categorically Eligible. Verification may include confirmation of any other information required on the application, such as household size.
- b. **Direct verification** is using records from public agencies to verify income and/or program participation.
  - c. **Error-prone** means applications within \$100 per month of the applicable IEGs. Error-prone replaces the term *Focused Sample*.
  - d. **Random sampling** means each application has an equal chance of being selected. A statistically valid random sample is not required. The LEA must determine a selection interval by dividing the number of applications by the required sample size.
2. Verification must take place **AFTER** the application has been approved.
  3. Prior to any verification activity, each SFA must ensure that it will provide a toll-free phone number for households to use during the verification process. The toll-free phone number must be included in the SFA's written notice to the household. USDA has indicated that if an SFA has no **long-distance** telephone patrons, a regular phone number will suffice. Although the language of the law states that a toll-free phone number must be provided, the intent is that a household can get help from the SFA without any expense to the household. Therefore, an SFA could provide a **collect call** number to households to meet this requirement.

## B. Verification Requirements

### 1. Definitions:

- a. **Sample pool** means the total number of applications approved as of October 1
  - Any student approved for benefits by an application will be in the sample pool for verification.

**Example:** Students who are MED REDUCED on the WAVE but are free based on an application ARE to in the verification pool.
- b. **Sample size** means the number of applications subject to verification; the minimum and maximum sample size is 3 percent total.

### 2. Exemption From Verification:

- a. For children who have been certified under Direct Certification procedures, including children documented as eligible migrant, runaway, homeless children; foster children; and children participating in Head Start/Even Start.
- b. Children in RCCIs, except for applications for any day students attending the institution. These applications are not included in the sample pool.
- c. In schools participating only in the SMP.
- d. In schools where all children are served with no separate charge for food service and no special cash assistance is claimed (i.e., nonpricing programs claiming only the paid rate of reimbursement).
- e. In LEAs where all schools participate in Provision 2 and 3, except in those years in which applications are taken for all students in attendance (i.e., the base year).
- f. Sites may choose not to count applications for students in split-session kindergarten programs participating in the SMP when determining the verification sample size.
- g. In LEAs where all schools participate in CEP.

### 3. Verification Time Line: **(The entire verification process must be completed by November 15)** (Reference USDA Policy Memos 2005-SP-09 and 2005-SP-1)

- a. Annually, each SFA **MUST** select and verify a sample of applications approved for benefits unless the SFA is otherwise exempt. At least one application must be verified.
- b. **Sample Size:**
  - (1) The required sample size is based on the total number of approved applications on file October 1. **NOTE: SFAs must remove any applications for students who have been**

*directly certified prior to counting the number of approved applications on file as of October 1.* Verification may begin prior to October 1 if the SFA projects the number of approved applications that will be on file October 1. SFAs following this procedure must check the number of applications on file as of October 1 to ensure that the minimum required sample size has been verified. School districts **must not** verify more than or less than the sample size chosen. (Memo SP-42-2017)

**NOTE: If the school’s 30th operating day happens to fall on or after October 1, do not include carryover applications in this pool because they are temporary.**

- (2) An application is counted as one application, regardless of the number of children represented on the application. The sample size depends on the number of paper applications, not the number of children represented. When calculating sample sizes, all fractions or decimals **MUST** be rounded upward to the nearest whole number. **NOTE: If one household has submitted an individual application for each student, the SFA should staple all of them together and count them as one application.**

- (3) Types of Sample Sizes.

- (a) **Standard Sample Size**—The *standard sample size* is the lesser of 3 percent of all approved applications or 3,000 applications and must be drawn from error-prone applications. Fractions must be rounded up.

**Error-Prone Application:** An application with incomes of \$1,200 annually or \$100 monthly **BELOW** the free scale or **BELOW** the reduced-price scale. In cases in which there are not enough error-prone applications to comply with the required sample size options, SFAs must randomly select additional applications to fulfill the percentage or number requirement.

**An Error Prone Scale is available in Other Documents**

| <b>Available Sample Sizes</b>                    |                                                                                                                                                                                                                                                                                                                                                                       |
|--------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Standard Sample Size [7 CFR 245.6a(c)(3)]</b> |                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Standard</b>                                  | Sample size equals the lesser of: <ul style="list-style-type: none"> <li>• Three percent of all applications approved by the LEA for the school year, as of October 1 of the school year, selected from error prone applications; or</li> <li>• 3,000 error prone applications approved by the LEA for the school year, as of October 1 of the school year</li> </ul> |

- (b) **Alternate Sample Sizes:** In lieu of the standard sample size, SFAs may elect to use one of two *alternate sample sizes* if the district had a verification nonresponse rate of less than 20 percent in the previous school year. If the district uses an alternate sample size, the Verification Response Worksheet must be on file. The worksheet can be found on **page E-71 (Page E-72 for OKC & Tulsa)** (Reference USDA Policy Memo 2005-SP-27)

The chart below describes the difference between the alternate sample sizes:

- Alternate One
- Alternate Two

| <b>Alternate Sample Sizes Available to Qualified SFAs [7 CFR 245.6a(c)(4)]</b><br>(District must have a response rate of 80% or higher to conduct Alternate Sample Size) |                                                                                                                                                                                                                                                                                                                                                            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Alternate One</b>                                                                                                                                                     | Sample size equals the lesser of: <ul style="list-style-type: none"> <li>• Three percent of all applications approved by the LEA for the school year, as of October 1 of the school year, selected at random; or</li> <li>• 3,000 applications approved by the LEA for the school year, as of October 1 of the school year, selected at random.</li> </ul> |

|                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Alternate Two</b> | <p>Sample size equals the lesser of the sum of either:</p> <ul style="list-style-type: none"> <li>• 1,000 of all applications approved by the LEA, as of October 1 of the school year, selected from error prone applications; or</li> <li>• One percent of all applications approved by the LEA, as of October 1 of the school year, selected from error prone applications.</li> </ul> <p><b>PLUS</b> the lesser of:</p> <ul style="list-style-type: none"> <li>• 500 applications approved by the LEA, as of October 1 of the school year, which provide case numbers in lieu of income information; or</li> <li>• One-half of one percent (.05 percent) of applications approved by the LEA, as of October 1, of the school year that provide case numbers in lieu of income information.</li> </ul> |
|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Substitutions of Original Sample:** Out of the 3 percent error-prone application sample size, up to 5 percent may be declined (school districts **ROUND UP**) and replaced with other error-prone applications. The reason an SFA would decline an application is if the SFA was aware of extenuating circumstances that may cause difficulty in obtaining a response from the family. Any application removed must be replaced with another approved application selected on the same basis.

**NOTE: If the 5 percent of total applications results in less than one application, one application may still be replaced.**

c. **Second Notice of Verification (initial follow-up):** It is required the district send out a second notice if the household does not respond to the initial verification request.

d. **Nonresponse rate** is defined as the percentage of approved household applications selected for verification for which verification information was not obtained by the SFA. This definition is used to determine if a follow-up contact is required.

The following are considered a nonresponse:

- The household does not contact the SFA when the initial request for verification is sent or when the SFA attempts follow-up.
- The household responds to the initial request but provides incomplete information, and the SFA is unable to determine if the eligibility determination was correct.
- The household responds to the initial request but fails to provide the SFA with documents or is otherwise unable to provide appropriate documentation. (Reference USDA Policy Memo 2009-SP-13)

Students who reapplied and were reapproved for benefits after being terminated for nonresponse cannot be counted as having responded when determining the response rate. (Reference USDA Policy Memo 2005-SP-24)C.

#### Confirmation Review

1. Prior to conducting any verification activity for applications selected for verification, the SFA shall ensure that the initial eligibility determination is reviewed for accuracy by an individual other than the determining official. The SA may waive this requirement if the local SFA is using a computer software program that demonstrates a high level of accuracy in processing an initial eligibility determination in accordance with the IEGs. **NOTE: An LEA wanting this waiver must contact the program specialist. Further, any LEA that conducts a confirmation review of all applications at the time of certification is not required to conduct confirmation reviews prior to verification.**
2. Outcome of Confirmation Review—Depending on the outcome of each confirmation review, the LEA takes one of the following actions:
  - a. No change in status—If the initial eligibility status was correct, the SFA verifies the applica-



- tion.
- b. Status changes from reduced-price to free—The SFA makes the increased benefits available immediately, notifies the household of the change in benefits, and verifies the application. If verification reduces the level of benefits from free to reduced-price or paid, the household is sent a Notice of Adverse Action.
- c. Status changes from free to reduced-price—The SFA does not change the child’s status and verifies the application. If the child’s free status is verified, the SFA does not notify the household. However, if the child’s status changes from free to either reduced-price or paid, the household is sent a Notice of Adverse Action.
- d. Status changes from free or reduced-price to paid—The SFA immediately sends the household a Notice of Adverse Action, does not verify the application, selects a similar application (for example, another error-prone application) for verification, and follows the confirmation review procedures for the newly selected application. (Refer to **page E-73** for a copy of the Confirmation Review of Benefits Notification and Adverse Action form that SFAs must use when notifying households of changes.)

#### D. Notification of Selection for Verification of Eligibility

1. When a household is selected for verification and is required by the SFA to submit documents or other forms of evidence to document eligibility, the household **MUST** be sent a notice informing it of its selection and of the types of information acceptable to the SFA. Refer to **page E-74-75** for a copy of Notification of Selection for Verification of Eligibility. The notice **MUST** include the following:
  - a. The household has been selected for verification.
  - b. Use of Information Statement.
  - c. The types of acceptable information that may be provided to confirm current income, including pay stubs, award letters from assistance agencies for benefits such as social security or supplemental security income, and support payment decrees from courts.
  - d. The household is to provide documentation of income for any point in time between the month prior to application and the time the household is required to provide income documentation. (Reference USDA Policy Memo 2004-SP-5)
  - e. The household may provide proof that the child is a member of a currently certified SNAP, TANF, or FDPIR household instead of providing income information or that a child is Other Source Categorically Eligible. Documentation must include effective dates.
  - f. Information **MUST** be provided by a date specified by the SFA and that failure to do so will result in termination of benefits.
  - g. The name and toll-free/collect/local telephone number of a site official who can answer questions and provide assistance.
2. When the SFA uses Direct Certification (agency records, SNAP, TANF, or FDPIR) to verify eligibility, the notice of selection is **NOT** required since the household will not have to provide documentation and household cooperation will not be necessary.

#### E. Verification Documentation

1. **Written Evidence**—Written evidence is the primary source of eligibility confirmation for all households, including SNAP, TANF, FDPIR households; Other Source Categorical Eligibility Programs; and foster child households.
  - a. Written evidence may be in the form of pay stubs from employers or award letters from welfare departments or other government agencies submitted by the household to the verifying officials as confirmation of eligibility.
  - b. Acceptable written evidence for income-eligible households contains the name of the household member, amount of income received, frequency received, and the date the income was received. For example, a pay stub with no dates would be insufficient.
  - c. Acceptable written evidence for categorically eligible households contains a written statement

from the SNAP, TANF, or FDPIR agency that specifies that the child is a member of a household currently receiving benefits. For Other Source Categorical Eligibility Programs, an official letter, notice, or list from the appropriate State agency; from a social services agency or court system for foster children; or for Head Start/Even Start enrollees, from the office or coordinator for those programs will suffice as written evidence. The verifying official should examine the document provided to ensure that the child for whom the application was made is part of a household currently participating in any of these programs or is a foster child. Electronic Benefit Transfer (EBT) cards cannot be used to confirm eligibility in SNAP and therefore cannot be used for categorical eligibility purposes. A document from an assistance program that does not specify the certification period is not adequate for documentation. For example, the SNAP identification card is not acceptable because it usually does not have an expiration date.

A household that does not have satisfactory documentation from the assistance office, state or local agency for other source categorical eligibility may request a signed, dated letter from these offices verifying that the child is part of a household currently receiving their benefits.

***NOTE: If a household is selected for regular verification or verification for cause and the application indicates zero income, the LEA must request an explanation of how living expenses are met and may request additional written documentation or collateral contacts.***

2. **Collateral Contacts**—A collateral contact is a person outside of the household who is knowledgeable about the household’s circumstances and can give confirmation of a household’s income or SNAP, TANF, FDPIR, or Other Source Categorical Eligibility Program status.
  - a. Collateral contacts include employers, social service agencies, migrant workers’ agencies, and religious or civic organizations.
  - b. The verifying official should request a collateral contact only in cases when the household has not been able to provide adequate written evidence.
  - c. The verifying official **MUST** give the household the opportunity to designate the collateral contact. However, the verifying official may select a collateral contact if the household fails to designate one or designates one who is unacceptable to the verifying official. In either case, no contact may be made without first notifying the household and obtaining its permission.
  - d. All collateral contacts may be written or oral and must be documented, dated, and initialed.
  - e. The LEA will examine any written information provided by the collateral contact or evaluate any oral information. If the collateral contact is unwilling or unable to provide the requested information, the LEA must contact the household to complete the verification process.
  
3. **Direct verification** is only to be used during the verification process (Reference USDA Policy Memos SP-08-2005 and SP-29-2005)—A household’s eligibility may be confirmed through the use of information maintained by other government agencies to which the SFA has legal access. Direct verification must be conducted prior to contacting the household for documentation. When verification is made through other agency records, such agencies may have their own notification requirements.
  - a. SFAs and state agencies may use:
    - The latest available information for one month (no older than 180 days prior to the date of the free and reduced-price application).
    - Information for all months from the month prior to application through the month direct verification is conducted.
  - b. The LEA must only submit the names of school children certified for free or reduced-price meal benefits listed on the application. These names are submitted to the agency administering an eligible program (for example, SNAP or the Medicaid program). The names of other household members (all adults, children who are not attending school, or children not approved for free or reduced-price meals) cannot be submitted for direct verification purposes. (Refer to **page E-76-77** for a copy of a Direct Verification form.)
  - c. If information obtained through direct verification of an application for free and reduced-price meal benefits indicates a child is participating in one of these programs, no additional

verification is required. The eligibility status of the child or children listed on the application is considered verified.

- d. If information provided by the public agency does not verify eligibility, the LEA must proceed with regular verification activities.

#### F. Verification Results

If verification results in a change in benefit level or termination, the change **MUST** be extended to all children in the household who were determined eligible by information that no longer supports the benefit level. If verification results in higher benefits (e.g., a child who is moved from the reduced-price to free category), this change is effective immediately and **MUST** be implemented no later than three operating days after verification. Parents should be notified through whatever channels the SFA uses to notify the household of approval for benefits. Verification of a household's income eligibility for free or reduced-price meals **MUST** result in one of the following:

1. **No change in benefit level**—The household's current documentation supports the level of benefits for which the household has been approved.
2. **Reduction in benefit level**—The household's current documentation identifies income too high for the level of benefits for which the child has been approved. Therefore, the household's eligibility **MUST** be changed from free to reduced-price, free to full-price, or from reduced-price to full-price. Refer to Items G and H for additional procedures in this case.
3. **Increase in benefits level**—The household's current documentation qualifies the household for free meals rather than reduced-price meals. Therefore, the household's eligibility **MUST** be changed from reduced-price to free meals.
4. **Termination of Benefits**—Free or reduced-price benefits **MUST** be terminated for households that do not respond to verification efforts or whose current documentation does not support eligibility for either free or reduced-price meals.

#### G. Verification Completion

1. To continue the verification process subsequent to household notification, the LEA must either determine:
  - If the household submitted adequate information to complete its individual verification activity.
  - If follow-up with the household is needed.
2. When the household does comply:
  - a. If the household submits written evidence, review the document for the name, date, and amounts stated to determine if it is sufficient to determine total **CURRENT** income. If the written evidence is current and confirms the eligibility determination previously made, the verification requirement has been satisfied.
  - b. If the written evidence confirms a higher or lower income and changes the eligibility determination previously made, the verification requirement has been satisfied.
    - If written evidence confirms a higher income and benefits are reduced or terminated, procedures in Item H need to be implemented.
    - If written evidence confirms a lower income and benefits are increased, the household must be notified.
  - c. Complete the verification section at the bottom of each free and reduced-price meal application verified in order to document the verification process. **NOTE: If this information is computer-generated, this step is not required. The entire verification process must be completed by November 15.**
3. When the household does not comply:
  - a. All households not responding to the initial verification notice **MUST** be contacted again in writing, by e-mail, or by phone. This information **MUST** be documented. If the house-

- hold does not submit sufficient written evidence, site officials must contact the household to request the missing written evidence of current income and advise the household that failure to comply or designate a collateral contact will result in termination of benefits. The Verification Results and Adverse Action form on **page E-78** may be used for this purpose. SFAs may contract with a third party to assist in the follow-up process.
- b. If, after the contact above, the household still does not submit sufficient written evidence or fails to respond, send the ten calendar days' advance notice of adverse action and the verification requirement has been satisfied. If the household reapplies for benefits after the ten-day notice of adverse action has been processed, the household would need to submit not only a new application, but also the verification documentation. The SFA may verify the household's eligibility prior to approval.
  - c. Complete the verification section at the bottom of each free and reduced-price meal application verified in order to document the verification process. **NOTE: If this information is computer-generated, this step is not required. The verification process must be completed by November 15.**
  - d. If the household selected for verification transfers out of the district before the information can be verified, verification cannot be completed. To meet the minimum verification requirements, a new application **MUST** be selected.

#### H. Letter of Verification Results and Adverse Action

All households for whom benefits are to be reduced or terminated **MUST** be given ten calendar days' written advance notice of the change. (Exception: If the SFA is **NONPRICING** and all students eat free, regardless of whether they are **REDUCED-PRICE** or **PAID**, written notification is not required.)

1. The first day of the advance notice period is the day the notice is sent.
2. The notice **MUST** advise the household of the following:
  - a. The change in benefits.
  - b. The reason(s) for the change.
  - c. An appeal **MUST** be filed within the ten calendar days' advance notice period to ensure continued benefits while awaiting a hearing and decision.
  - d. The instructions on how to appeal.
  - e. The household may reapply for benefits at any time during the school year. (Verification documentation must be submitted before approval can be given.)
  - f. Assistance Program households may submit an application containing household names and income information and provide written evidence of current household income.  
**A copy of the form is on page E-78**

#### I. Benefits During Appeal

When a household appeals a reduction or termination of benefits within the ten calendar days' advance notice period, the SFA **MUST** continue to provide the benefits for which the child was originally approved until a final determination is made. The SFA may continue to claim reimbursement at that level during this period.

When a household does not appeal a reduction or termination of benefits during the ten calendar days' advance notice period, or the hearing official rules that benefits **MUST** be reduced, the actual reduction or termination of benefits **MUST** take place no later than ten operating days or ten calendar days after the decision of the hearing official.

#### J. Hearing Procedure

The hearing procedure in the SFA's free and reduced-price policy statement **MUST** be followed. The hearing official **MUST** be an individual who was not connected with the approval or verification process.

The household may request a school conference prior to a formal hearing. Any such conference **must not** prejudice a later appeal.

K. Households That Reapply for Program Benefits Once Verification Has Caused a Reduction in Benefits or a Termination of Benefits

Households affected by a reduction or termination of benefits may reapply for benefits at any time during the school year. **However, if benefits to a household have been reduced or terminated and the household reapplies in the same school year, the household must be required to submit income documentation or proof of participation in Assistance Programs at the time of reapplication.** The SFA may verify the household's eligibility prior to approval. These are not considered new applications.

L. Verification for Cause

1. An SFA has the authority and is obligated to verify all questionable applications (**verification for cause**) at any time. **For cause** applications are verified outside the basic sample process. A **for cause** verification is when an SFA has reason to believe that an application is not correct or information has come to the SFA's attention that questions the validity of the application. Please remember that an **application cannot be verified until it has been approved.** SFAs should be cautioned that **for cause** verification should be handled in such a manner that there is no discrimination or intended harassment in the selection. **NOTE: Directly certified students cannot be included for verification for cause.**
2. To verify an approved application for cause, the SFA must send the household a letter explaining that it must submit verification of eligibility information for continued eligibility. The verification letter may be sent at the same time as a notice of eligibility.
3. The SFA verifies applications for cause following the same procedures as normal verification procedures. Any household that fails to submit requested verification information by the date specified by the SFA or that submits verification information that does not support the initial determination of eligibility must be sent a Notice of Adverse Action.
4. Recently, concerns have been raised about school district employees allegedly misrepresenting their incomes on applications to receive free or reduced-price school meals for their children. As a result, LEAs have asked if they may use the salary information of their own employees, maintained for business purposes, as a tool to implement verification for cause and help ensure the integrity of free and reduced-price certifications.

LEAs can use verification for cause to review approved applications for free or reduced-price meals when known or available information indicates school district employees may have misrepresented their incomes on their applications to receive free or reduced-price meals for their children. It is recommended that an LEA consult with legal counsel in establishing the parameters of verification for cause for school district employees.

Verification for cause **must not** be used to automatically verify the households of all school district employees whose children are certified for free or reduced-price meals. However, from among the list of children approved for free or reduced-price meals, an LEA could identify children of school district employees and use LEA salary information available to them to identify questionable applications and then conduct verifications for cause on those questionable applications. (Reference USDA Policy Memo SP-13-2012)

M. Record Keeping

Documentation **MUST** be kept by the SFA to demonstrate compliance with the verification requirements when SFAs are reviewed by state or federal reviewers. Documentation would also be needed in case of an applicant's appeal.

1. The description must include:
  - A summary of the verification efforts, such as the selection process and the source of information used.
  - The total number of applications on file October 1.
  - The percentage and number of applications verified. (Remember to always round the fraction upward when figuring the number of applications to be verified.)
2. The verifying official's signature on the free and reduced-price meal application must be completed by the SFA to document verification results.
3. SFAs must submit the Verification Summary Report through CARS before the December claim may be submitted.
4. The following is to be maintained on file each year:
  - A copy of the Verification Summary of Applications and the Verification Summary Report submitted to the State agency.
  - A copy of each free and reduced-price meal application selected for verification.
  - Written evidence submitted by households, including a *stamped-in* date and/or the envelope in which the documents were sent to the SFA.
  - Calculation information used in comparing the income documents submitted and the amount of income originally reported by the households.
  - A copy of any correspondence to the households concerning verification efforts, including notice of reduction or termination of benefits.
  - Annotation of any information obtained through telephone or *in-person* contacts that resulted in some type of action being taken in completing the verification process.

#### N. Suggested Verification Time Line

1. Each SFA may develop its own time frame calendar, as long as *the entire verification process is completed by November 15*. The following is an example of dates that could be used:
  - **OCTOBER 1**—(First notice required) Select applications and notify households and/or SNAP, TANF, or FDPIR agency. The SFA must indicate the date that the information from the household or agency is due.
  - **OCTOBER 18**—(Second notice required) Contact households that have not responded and those who presented insufficient written documentation.
  - **NOVEMBER 4**—Send ten calendar days' advance Notice of Adverse Action to households that have not responded or have not submitted the required information in full or are no longer eligible for meal benefits by the established due date.
  - **NOVEMBER 14**—Terminate those who do not respond. If a household appeals, benefits must continue as approved until the hearing official's decision is rendered.
  - **NOVEMBER 15**—All verification efforts must be completed.
2. Applications are to be verified as the income, SNAP, TANF, or FDPIR information is received. If a household is to receive a reduction or termination of benefits as a result of verification, the ten calendar days' advance notice of the change must be sent immediately after the information is received.

#### O. Verification Report

Each SFA is required to complete and certify a Verification Summary Report after November 15. This report must be completed prior to the SFA being able to access its December claim for reimbursement. (Refer to **pages E-79-82** for an example.)

# QUESTIONS AND ANSWERS ON ELIGIBILITY

## Section 1: Getting Started

**Q1: When should schools distribute information about the application, and when should schools distribute the household application itself?**

**A:** Schools should send the information letter to households very early in the school year, which begins July 1. Applications should also be distributed on July 1 or soon thereafter. Distributing applications early in the school year ensures households have sufficient time to complete and return the application prior to the first day of school.

Additionally, schools are encouraged to provide families with information about the school meal programs in routine contacts throughout the school year and remind families that applications may be submitted at any time during the school year.

Information letters may not, however, be sent to households before the end of one school year for the subsequent year, nor can the LEA accept and process applications before the federally defined school year. **NOTE: Year-round schools may distribute the letters in June.**

**Q2: May schools require all households to complete and submit an application for free and reduced-price meals?**

**A:** No. Schools may not require households to complete and submit an application. It is in the household's choice to complete and submit an application for meal benefits. However, LEAs must inform households that they may receive meal benefits if they are eligible.

**Q3: May schools include IEGs for free school meals, in addition to including the IEGs for reduced-price meals, when sending out the application and any descriptive materials?**

**A:** No. The application and any descriptive materials distributed to households may only contain the income levels for reduced-price school meal eligibility. This requirement is statutory (42.U.S.C. 1758 [b][2][B][i] and [ii]).

## Section 2: The Basis of Eligibility

**Q1: When foster parents apply for benefits for their nonfoster children, do they include their foster children as household members?**

**A:** Households with foster and nonfoster children may choose to include the foster child as a household member. If the foster child is included as a household member, any personal income earned by the foster child must be included on the household application. This will streamline the application process and may help the foster family's nonfoster children qualify for free or reduced-price meals based on household size and income. The foster child is categorically eligible for free meals regardless of the eligibility of the foster family's nonfoster children.

**Q2: If a foster child is adopted, is the foster child still categorically eligible for free meals based on foster status?**

**A:** Once a foster child is adopted, the child is no longer categorically eligible for free meals based on foster status. However, due to year-long eligibility, the free eligibility status of a foster child would not change within the school year, including up to 30 operating days into the subsequent school year. The household that adopted a foster child would need to apply for meal benefits at the start of the subsequent school year to determine if the household is eligible for free or reduced-price meal benefits.

**Q3: If family members or friends are temporarily doubling up in a home, may the host family count their guests as members of the household?**

**A:** If the temporary household members are part of the same economic unit as the host family, the host family may count their guests as members of the household. In this situation, income for the temporary household members must also be counted. If the temporary household members

are not part of the same economic unit as the host family, they are not considered part of the household.

**Q4: If one household owns a housing unit and rents living space to another household, must the household receiving the rental fee report the rental fee as income?**

**A:** Yes. Income includes all money received, including money from rental properties or rooms. If a household receives and keeps rental income from another household, it must be counted as income.

**Q5: Is the housing allowance (Basic Allowance for Housing, or BAH) received by military service personnel counted as income when making an eligibility determination for free or reduced-price meals?**

**A:** Yes. Income is defined as all cash received on a recurring basis, which would include BAH. In-kind benefits, however, are not cash payments. Therefore, in-kind benefits (such as *provided* housing) are not considered income for the purposes of determining free and reduced-price eligibility. For more information, see: *Exclusion of the Housing Allowance for Military Households in Privatized Housing—Reauthorization 2004: Implementation Memo CN 1*, <https://www.fns.usda.gov/exclusion-housing-allowance-military-households-privatized-housing-reauthorization-2004>.

**Q6: If a household member receives a cash subsidy for health insurance from an employer, must the household report the subsidy on the application for school meals?**

**A:** Yes. All household members must report gross income, which includes cash subsidies for insurance payments.

**Q7: A child is not employed full-time or part-time, but occasionally babysits for a neighbor in the evening and on weekends. Must the household report the child's earnings from babysitting on its income application?**

**A:** No. Infrequent earnings such as income from occasional babysitting or mowing lawns is not counted as income and should not be listed on the application.

**Q8: Are children in households receiving tribal TANF benefits categorically eligible for free school meals?**

**A:** Yes. Children in households receiving tribal TANF benefits under Title IV of the Social Security Act are categorically eligible for free school meals and can be determined eligible through Direct Certification as long as the tribal TANF program standards are comparable to or more stringent than NSLP standards.

**Q9: How should an LEA certify children from a federally declared disaster area who have temporarily moved into the school district?**

**A:** Typically, these children are determined homeless by the school district's homeless liaison or are receiving Disaster SNAP (D-SNAP, special disaster benefits), and they must be certified for free meals and/or milk. LEAs should contact their State agency for more information.

### Section 3: Establishing Eligibility

**Q1: If an LEA uses a computer system to generate determinations, must the determining official sign or initial each application?**

**A:** The LEA (not the computer system) is ultimately responsible for determining eligibility for free or reduced-price meals. The LEA must ensure its computer system meets all requirements and performs all functions as outlined in this guidance with a high degree of accuracy. The determining official may sign or initial and date a separate sheet of paper that could then be attached to a batch of applications. Alternatively, the official may make a note to the electronic file. The computer system should be able to capture the original date of the approval and the basis for the determination (i.e., household size and income) and update the status of applications to account for transfers, withdrawals, terminations, and any other changes.



**Q2: May an FSMC assist with the processing of applications, along with other management responsibilities?**

**A:** While the LEA is ultimately responsible for ensuring all Program requirements are met, an employee of the FSMC may act as an agent for the LEA in various aspects of the application, certification, and verification processes. The employee must comply with all requirements for these processes, including limited disclosure of individual eligibility information. For more information, see *Section 5: Confidentiality and Disclosure*.

**Q3: What notification is recommended when a eligibility determination is made?**

**A:** Households must be notified of their eligibility for benefits. LEAs may notify households of their children's eligibility by letter, via e-mail, over the telephone, or by using an automated notification system. If an application is denied, however, the household must be notified of the denial in writing through the postal service or an e-mail sent to the parent or guardian's e-mail address.

**Q4: May a household determined to be eligible for free meals at the start of the school year choose to submit a new application later in the school year?**

**A:** Yes. While households are not required to report changes in their circumstances, a household may choose to submit a new application during the school year. The new application would supersede the original application. In this case, the LEA must explain to the household that the household is not required to report the change due to the year-long duration of eligibility. The change will only go into effect if the household requests the change in writing. If benefits are voluntarily decreased, the LEA must send a notice of adverse action.

**Q5: What should a school do if a household eligible for free meals wishes to pay at the reduced price?**

**A:** The school should respect the household's wishes and allow the household to pay the reduced-price charge. The household's application should correctly reflect the child's eligibility status but should include a note that the family has elected to pay the reduced-price charge. Meals served to such a child must be claimed at the reduced-price reimbursement rate, since the school received the reduced-price payment from the household.

#### **Section 4: School Meal Application**

**Q1: At the local level, applications sometimes request a birth date or other information not required by statute or regulation. Should LEAs mark applications missing such information as complete?**

**A:** Yes. Since the additional information described above is not required by statute or regulation for a student's certification of eligibility for free or reduced-price school meals, an application (whether paper or electronic) must be considered complete even if the additional information is not provided.

**Q2: May a Web-based application system ask for a student identification number or student birth date?**

**A:** A Web-based application system may ask for a student identification number or student birth date if the LEA notifies households that the two data fields are not required by the NSLP, SBP, or SMP. The LEA also must ensure a paper-based application is available to households that do not wish to provide the additional information. This notification should be included on the Web-based portal. The disclaimer should indicate the availability of a paper-based application and provide a contact number for further assistance.

**Q3: Is the application considered complete if the racial/ethnic data collection question is not completed?**

**A:** Yes. The household is not required to complete the racial/ethnic data question. Failure to provide this information must not affect a child's eligibility for benefits. If the applicant fails to provide this information, school officials should follow the guidance included in *FNS Instruction 113-1*:

## **Section 5: Confidentiality and Disclosure**

**Q1: What does disclosure mean as it relates to children’s eligibility status?**

**A:** Disclosure means revealing or using individual children’s program eligibility information obtained through the free and reduced-price eligibility process for a purpose other than the purpose for which the information was obtained. Disclosure includes (but is not limited to) access, release, or transfer of personal data about children by means of print, tape, microfilm, microfiches, electronic communication, or any other means. It includes eligibility information obtained through the application or through Direct Certification.

**Q2: What eligibility information may an LEA disclose to a means-tested nutrition program?**

**A:** Without household consent, the LEA may only disclose a child’s name and eligibility status. Disclosure of other information, such as parent or guardian names and addresses, requires household notification and consent.

**Q3: For the purposes of disclosure, who are persons *directly connected* to the administration of state Medicaid and CHIP?**

**A:** Persons *directly connected* with the administration of state Medicaid or CHIP are state employees and persons authorized under federal and state Medicaid and CHIP requirements to process applications or to make eligibility determinations. LEA officials should check with their state Medicaid or CHIP coordinator to determine the persons or entities authorized to enroll children in Medicaid or CHIP.

**Q4: How long should LEA officials wait for a response from a parent or guardian before releasing information to Medicaid or CHIP?**

**A:** LEAs should provide parents with adequate time to respond. LEAs are encouraged to include a notification on the statement sent to households informing them they should respond by a specified date if they do not want their information disclosed to Medicaid or CHIP.

**Q5: Is each LEA required to enter into a separate Memorandum of Understanding for disclosing information to Medicaid/CHIP?**

**A:** Yes, if the LEA and State agency agree to disclose children’s eligibility information to Medicaid/CHIP, each LEA must be given the opportunity to decline providing information to Medicaid/CHIP.

**Q6: May children’s eligibility information be shared with the school guidance counselor?**

**A:** Yes, but only with household consent. Free and reduced-price eligibility status may not be shared with guidance counselors without household consent. An LEA or school could send a letter to all households informing them of other school-based programs available to households that qualify for free or reduced-priced meals. Interested households could then contact the guidance office if they are interested in pursuing any of these benefits and to complete a consent form.

**Q7: If an LEA contracts with a third party server to store electronic school meal applications, do confidentiality and disclosure requirements still apply?**

**A:** Yes. Confidentiality and disclosure requirements surrounding the school meal applications apply regardless of the application type. The information must be protected and only viewed and/or released according to the guidelines. LEAs contracting with a third party must have an agreement in place that clearly delineates FNS requirements for confidentiality.

## Section 6: Verification

**Q1: Is the LEA required to provide a no-cost telephone option, even if no households live outside the local calling area?**

**A:** Yes. The LEA is not required to have a toll-free number, but parents and guardians must be able to call collect (7 CFR 245.6a[f][5]). This helps to ensure parents and guardians can contact the LEA during the LEA's operating hours if they work outside the local calling area.

**Q2: What if the LEA is using other agency records to verify applications and the agency does not respond before the November 15 deadline?**

**A:** The LEA should document its attempt to contact the appropriate agency in advance of the November 15 deadline. This would demonstrate good faith and would be a valid reason for the State agency to extend the deadline.

**Q3: A household voluntarily provides pay stubs that conflict with the income information on the household's application. According to the application, the household is eligible for free meals but according to the pay stubs, it appears the household is not eligible. What should the determining official do?**

**A:** Under these circumstances, the LEA official must take appropriate action by either:

- Sending the household a notice of approval and a notice of adverse action at the same time, giving the household an opportunity to resolve the discrepancy during the advance notice of adverse action.
- Sending the household a notice of approval and a verification letter, based on verification for cause, at the same time.

LEA officials are in the best position to determine which action is appropriate. Regardless of the action taken, the inconsistency must be resolved expeditiously.

**Q4: How is overtime income counted for the purposes of verification?**

**A:** The LEA official should work with the household to determine whether overtime during the verification month is representative of overtime worked in other months. If the overtime is a rare or sporadic source of income, the household's income should be calculated on the regular monthly income without the overtime.

**Q5: If a household is paid weekly and submits a pay stub for a week, must the LEA request pay stubs for a whole month?**

**A:** If the weekly pay stub is representative of the household's regular weekly income, one pay stub is sufficient.

**Q6: What if an application is selected for verification, but the household transfers out of the school district before the information can be verified?**

**A:** If a household selected for verification transfers out of a school district before the information can be verified, verification cannot be completed. To meet minimum verification requirements, a new application must be selected.

## 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 **(\$)**; lunch costs **(\$)**. **Your children may qualify for free meals or for reduced-price meals.**

Reduced-price is **(\$)** for breakfast and **(\$)** 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 **(Supplemental Nutrition Assistance Program [SNAP]), (Food Distribution Program on Indian Reservations [FDPIR], or (Temporary Assistance for Needy Families [TANF])** are eligible for free meals.
- Foster children who 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 (IEGs). Your children may qualify for free or reduced-price meals if your household income falls at or below the limits on this chart.

| <b>FEDERAL ELIGIBILITY INCOME CHART FOR SCHOOL YEAR 2025</b> |               |                |                        |                        |               |
|--------------------------------------------------------------|---------------|----------------|------------------------|------------------------|---------------|
| <b>Household Size</b>                                        | <b>Annual</b> | <b>Monthly</b> | <b>Twice Per Month</b> | <b>Every Two Weeks</b> | <b>Weekly</b> |
| <b>1</b>                                                     | 27,861        | 2,322          | 1,161                  | 1,072                  | 536           |
| <b>2</b>                                                     | 37,814        | 3,152          | 1,576                  | 1,455                  | 728           |
| <b>3</b>                                                     | 47,767        | 3,981          | 1,991                  | 1,838                  | 919           |
| <b>4</b>                                                     | 57,720        | 4,810          | 2,405                  | 2,220                  | 1,110         |
| <b>5</b>                                                     | 67,673        | 5,640          | 2,820                  | 2,603                  | 1,302         |
| <b>6</b>                                                     | 77,626        | 6,469          | 3,235                  | 2,986                  | 1,493         |
| <b>7</b>                                                     | 87,579        | 7,299          | 3,650                  | 3,369                  | 1,685         |
| <b>8</b>                                                     | 97,532        | 8,128          | 4,064                  | 3,752                  | 1,876         |
| For each additional member, added:                           | 9,953         | 830            | 415                    | 383                    | 192           |

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 have not 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.
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 **(Web site)** 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, 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.
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 DO NOT 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 UNITED STATES (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 \$900, 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 IS NOT 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 **(SNAP)** or other assistance benefits, contact your local assistance office or call **1-877-760-0114** or **scan the QR code:**

If you have other questions or need help, call **(Phone Number)**.

Sincerely,

**(Signature)**



bit.ly/Food4MyFamily **HUNGER • FREE OKLAHOMA**

## 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 **(School District)**. 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. If at any time you are not sure what to do next, please contact **(School/School District Contact Here—Phone and E-Mail Preferred)**.

**PLEASE USE A PEN (NOT A PENCIL) WHEN FILLING OUT THE APPLICATION, AND DO YOUR BEST TO PRINT CLEARLY.**

### **STEP 1: LIST ALL HOUSEHOLD MEMBERS WHO ARE INFANTS, CHILDREN, AND STUDENTS UP TO AND INCLUDING GRADE 12**

Tell us how many infants, children, and 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 aged 18 or under **AND** are supported with the household's income.
- In your care under a foster arrangement or qualify as homeless, migrant, or runaway youth.
- Students attending **(School/School System Here)**, *regardless of age*.

- A. **List each child's name.** For each child, print his/her first name, middle initial, and last name. Use one line of the application for each child. If there are more children present than lines on the application, attach a second piece of paper with all required information for the additional children.
- B. **Is the child a student at (Name of School/School System Here)?** Mark *Yes* or *No* under the column titled *Student* to tell us which children attend **(Name of School/School District Here)**.
- 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 completing STEP 1, skip to STEP 4 of the application and these instructions. If you are applying for both foster and nonfoster children, go to STEP 3. **Foster children who live with you may count as members of your household and should be listed on your application.**
- D. **Are any children homeless, migrant, or runaway?** If you believe any child listed in this section may meet this description, please mark the *Homeless, Migrant, Runaway* box next to the child's name and **complete all steps of the application.**

**STEP 2: DO ANY HOUSEHOLD MEMBERS (INCLUDING YOU) CURRENTLY PARTICIPATE IN ONE OR MORE OF THE FOLLOWING ASSISTANCE PROGRAMS: SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP), TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF), OR FOOD DISTRIBUTION PROGRAM ON INDIAN RESERVATIONS (FDPIR)?** If *Yes*, record the proper case number (only one per household) in the box. Skip to STEP 4.

If anyone in your household participates in the assistance programs, your children are **ELIGIBLE** for free school meals.

**If NO ONE in your household participates in any of the above programs:**

- Leave **STEP 2** blank and go to **STEP 3**

**If ANYONE in your household participates in any of the above programs:**

- Write a case number for SNAP, TANF, OR FDPIR. You only need to provide one case number. If you participate in one of these programs and do not know your case number, contact your caseworker..
- Go to **STEP 4**.

## STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

### How do I report my income?

- Use the charts titled *Sources of Income for Adults* and *Sources of Income for Children* printed on the back side of the application form to determine if your household has income to report.
  - Report all amounts in **GROSS INCOME ONLY**. Report all income in whole dollars. Do not include cents.
    - Gross income is the total income received before taxes.
    - Many people think of income as the amount they *take home* and not the total **gross** amount. Make sure that the income you report on this application has **NOT** been reduced to pay for taxes, insurance premiums, or any other amounts taken from your pay.
  - Write a 0 in any fields where there is no income to report. Any income fields left empty or blank will also be counted as a zero. If you write 0 or leave any fields blank, you are certifying (promising) that there is no income to report. **If local officials suspect that your household income was reported incorrectly, your application will be investigated.**
  - Mark how often each type of income is received using the check boxes to the right of each field.
- A. **Report all income earned or received by children.** Report the combined gross income for ALL children listed in **STEP 1** in your household in the box marked “Child Income.” Only count foster children’s income if you are applying for them together with the rest of your household.

#### What is Child Income?

Child income is money received from outside your household that is paid **DIRECTLY** to your children. Many households do not have any child income.

| Sources of Income for Children                                      |                                                                                                                                                                           |
|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sources of Child Income                                             | Example(s)                                                                                                                                                                |
| • Earnings from work                                                | • A child has a regular full- or part-time job where he/she earns a salary or wages                                                                                       |
| • Social Security<br>— Disability payments<br>— Survivor’s benefits | • A child is blind or disabled and receives social security benefits<br>• A parent is disabled, retired, or deceased, and his/her child receives social security benefits |
| • Income from persons <b>OUTSIDE</b> the household                  | • A friend or extended family member <b>REGULARLY</b> gives a child spending money                                                                                        |
| • Income from any other source                                      | • A child receives income from a private pension fund, annuity, or trust                                                                                                  |

### FOR EACH ADULT HOUSEHOLD MEMBER:

#### Who should I list here?

When filling out this section, please include **ALL ADULT** members in your household who are:

- Living with you and share income and expenses, *even if not related and even if they do not receive income of their own.*

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.
- Infants and children and students already listed in STEP 1.

#### How do I fill in the income amount and source?

##### FOR EACH TYPE OF INCOME:

- Use the charts in this section to determine if your household has income to report.
- Report all amounts in **gross income ONLY**. Report all income in whole dollars. Do not include cents.
  - Gross income is the total income received before taxes or deductions.
  - Many people think of income as the amount they *take home* and not the total *gross* amount. Make sure that the income you report on this application has **NOT** been reduced to pay for taxes, insurance premiums, or any other amounts taken from your pay.

**FOR EACH ADULT HOUSEHOLD MEMBER: continued**

- Write a **0** in any fields where there is no income to report. Any income fields left empty or blank will be counted as zeroes. If you write **0** or leave any fields blank, you are certifying (promising) that there is no income to report. If local officials have known or available information that your household income was reported incorrectly, your application will be verified for cause.
- Mark how often each type of income is received using the check boxes to the right of each field.

- B. **List adult household members' names.** Print the name of each household member in the boxes marked *Names of Adult Household Members (First and Last)*. **Do not list any household members you listed in STEP 1.** If a child listed in STEP 1 has income, follow the instructions in STEP 3, Part A.
- C. **Report earnings from work.** Refer to the chart titled *Sources of Income for Adults* in these instructions, and report all income from work in the *Earnings From Work* field on the application. This is usually the money received from working at jobs. If you are a self-employed business or farm owner, you will report your net income. This is calculated by subtracting the total operating expenses of your business from its gross receipts or revenues.
- D. **Report income from public assistance/child support/alimony.** Refer to the chart titled *Sources of Income for Adults* in these instructions, and report all income that applies in the *Public Assistance/Child Support/Alimony* field on the application. Do not report the value of any cash value public assistance benefits **NOT** listed on the chart. If income is received from child support or alimony, only **court-ordered** payments should be reported here. Informal regular payments should be reported as *Other* income in the next part.
- E. **Report income from pensions/retirement/all other income.** Refer to the chart titled *Sources of Income for Adults* in these instructions, and report all income that applies in the *Pensions/Retirement/All Other Income* field on the application.
- F. **Report total household size.** Enter the total number of household members in the field *Total Household Members (Children and Adults)*. This number **MUST** be equal to the number of household members listed in STEP 1 and STEP 3. If there are any members of your household that you have not listed on the application, go back and add them. It is very important to list all household members, as the size of your household affects your eligibility for free or reduced-price meals.
- G. **Provide the last four digits of your social security number.** The household's primary wage earner or another adult household member must enter 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 member has a social security number, leave this space blank and mark the box to the right labeled *Check if no SSN*.

| Sources of Income for Adults                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Earnings From Work                                                                                                                                                                                                                                                                                                                                                                                                           | Public Assistance/Alimony/<br>Child Support                                                                                                                                                                                                                                                                                               | Pensions/Retirement/<br>All Other Income                                                                                                                                                                                                                                                                                                                                                             |
| <ul style="list-style-type: none"> <li>• Salary, wages, cash bonuses</li> <li>• <b>NET</b> income from self-employment (farm or business)</li> </ul> <p><b>If you are in the U.S. Military:</b></p> <ul style="list-style-type: none"> <li>• Basic pay and cash bonuses (<b>do NOT include combat pay, FSSA, or privatized housing allowances</b>)</li> <li>• Allowances for off-base housing, food, and clothing</li> </ul> | <ul style="list-style-type: none"> <li>• Unemployment benefits</li> <li>• Worker's compensation</li> <li>• Supplemental Security Income (SSI)</li> <li>• Cash assistance from state or local government</li> <li>• Alimony payments</li> <li>• Child support payments</li> <li>• Veteran's benefits</li> <li>• Strike benefits</li> </ul> | <ul style="list-style-type: none"> <li>• Social Security (including railroad retirement and black lung benefits)</li> <li>• Private pensions or disability benefits</li> <li>• Regular income from trusts or estates</li> <li>• Annuities</li> <li>• Investment income</li> <li>• Earned interest</li> <li>• Rental income</li> <li>• <b>REGULAR</b> cash payments from outside household</li> </ul> |



#### STEP 4: CONTACT INFORMATION AND ADULT SIGNATURE

**All applications must be signed by an adult member of the household.** 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 on the application.**

- A. ***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, e-mail address, or both is optional, but helps us reach you quickly if we need to contact you.
- B. ***Print and sign your name.*** Print your name in the box *Printed Name of Adult Completing the Form*. Sign your name in the box *Signature of Adult Completing the Form*.
- C. ***Today's date.*** In the space provided, write today's date.
- D. ***Share children's racial and ethnic identities (optional).*** On the back of the application, we ask you to share information about your children's race and ethnicity. **This field is optional and does not affect your children's eligibility for free or reduced-price school meals.**



# INSTRUCTIONS Sources of Income

## Sources of Child Income

| Sources of Child Income                                           | Example(s)                                                                                                                                                                |
|-------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| • Earnings from work                                              | • A child has a regular full- or part-time job where he/she earns a salary or wages                                                                                       |
| • Social Security<br>—Disability payments<br>—Survivor's benefits | • A child is blind or disabled and receives social security benefits<br>• A parent is disabled, retired, or deceased, and his/her child receives social security benefits |
| • Income from persons <b>OUTSIDE</b> the household                | • A friend or extended family member <b>REGULARLY</b> gives a child spending money                                                                                        |
| • Income from any other source                                    | • A child receives income from a private pension fund, annuity, or trust                                                                                                  |

## Sources of Income for Adults

| Earnings From Work                                                                                                                                                                                                                                                                                                                                                                                            | Public Assistance/Alimony/Child Support                                                                                                                                                                                                                                                                                   | Pensions/Retirement/All Other Income                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> <li>Salary, wages, cash bonuses</li> <li>NET income from self-employment (farm or business)</li> </ul> <p><b>If you are in the U.S. Military:</b></p> <ul style="list-style-type: none"> <li>Basic pay and cash bonuses (<i>do NOT include combat pay, FSSA, or privatized housing allowances</i>)</li> <li>Allowances for off-base housing, food, and clothing</li> </ul> | <ul style="list-style-type: none"> <li>Unemployment benefits</li> <li>Worker's compensation</li> <li>Supplemental Security Income (SSI)</li> <li>Cash assistance from state or local government</li> <li>Alimony payments</li> <li>Child support payments</li> <li>Veteran's benefits</li> <li>Strike benefits</li> </ul> | <ul style="list-style-type: none"> <li>Social Security (including railroad retirement and black lung benefits)</li> <li>Private pensions or disability benefits</li> <li>Regular income from trusts or estates</li> <li>Annuities</li> <li>Investment income</li> <li>Earned interest</li> <li>Rental income</li> <li><b>REGULAR</b> cash payments from outside household</li> </ul> |

## OPTIONAL Children's Racial and Ethnic Identities

We are required to ask for information about your children's race and ethnicity. This information is important and helps to make sure we are fully serving our community. Responding to this section is optional and does not affect your children's eligibility for free or reduced-price meals.

**Ethnicity (Check One):**  Hispanic or Latino  Not Hispanic or Latino  
**Race (Check One or More):**  American Indian or Alaskan Native  Asian  Black or African American  Native Hawaiian or Other Pacific Islander  White

The **Richard B. Russell National School Lunch Act** requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.

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, audiotype, 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: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>; 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: mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; or fax: (833) 256-1665 or (202) 690-7442; or email: [program\\_intake@usda.gov](mailto:program_intake@usda.gov). This institution is an equal opportunity provider.

## Do not fill out 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                     | How Often?                                                                                                               | Household Size                  | Eligibility:                                                                       |
| <input type="text"/>             | Annually <input type="text"/> Bi-Weekly <input type="text"/> 2 x Month <input type="text"/> Monthly <input type="text"/> | <input type="text"/>            | Free <input type="text"/> Reduced <input type="text"/> Denied <input type="text"/> |
| Determining Official's Signature | Date                                                                                                                     | Confirming Official's Signature | Date                                                                               |
| <input type="text"/>             | <input type="text"/>                                                                                                     | <input type="text"/>            | <input type="text"/>                                                               |
|                                  |                                                                                                                          | Verifying Official's Signature  | Date                                                                               |
|                                  |                                                                                                                          | <input type="text"/>            | <input type="text"/>                                                               |

# SHARING INFORMATION WITH OTHER PROGRAMS

Dear Parent/Guardian:

To save you time and effort, the information you gave on your Free and Reduced-Price School Meals Application may be shared with other programs for which your children may qualify. For the following programs, we must have your permission to share your information. Sending in this form will not change whether your children get free or reduced-price meals.

- 
- Yes! ***I DO*** want school officials to share information from my Free and Reduced-Price School Meals Application with **(Name of Program Specific to Your School)**.
  - Yes! ***I DO*** want school officials to share information from my Free and Reduced-Price School Meals Application with **(Name of Program Specific to Your School)**.
  - Yes! ***I DO*** want school officials to share information from my Free and Reduced-Price School Meals Application with **(Name of Program Specific to Your School)**.

If you checked ***Yes*** to any or all of the boxes above, fill out the form below to ensure that your information is shared for the children listed below. Your information will be shared only with the programs you checked.

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address \_\_\_\_\_ :

---

For more information, you can call **(Name)** at **(Phone)** or e-mail at **(E-Mail Address)**.

Return this form to: **(Address)** by **(Date)**.

# INCOME-ELIGIBILITY GUIDELINES FOR SCHOOL YEAR 2024-2025

## FOR *FREE* AND *REDUCED-PRICE* MEALS

This is the income scale used by \_\_\_\_\_  
to determine eligibility for free meals. (School Food Authority)

*(The Free Scale Should Not Be Distributed to Families)*

| <b>ELIGIBILITY SCALE FOR FREE MEALS</b> |               |                |                        |                        |               |
|-----------------------------------------|---------------|----------------|------------------------|------------------------|---------------|
| <b>130 Percent of Poverty Level</b>     |               |                |                        |                        |               |
| <b>Household Size</b>                   | <b>Income</b> |                |                        |                        |               |
|                                         | <b>Annual</b> | <b>Monthly</b> | <b>Twice Per Month</b> | <b>Every Two Weeks</b> | <b>Weekly</b> |
| <b>1</b>                                | 19,578        | 1,632          | 816                    | 753                    | 377           |
| <b>2</b>                                | 26,572        | 2,215          | 1,108                  | 1,022                  | 511           |
| <b>3</b>                                | 33,566        | 2,798          | 1,399                  | 1,291                  | 646           |
| <b>4</b>                                | 40,560        | 3,380          | 1,690                  | 1,560                  | 780           |
| <b>5</b>                                | 47,554        | 3,963          | 1,982                  | 1,829                  | 915           |
| <b>6</b>                                | 54,548        | 4,546          | 2,273                  | 2,098                  | 1,049         |
| <b>7</b>                                | 61,542        | 5,129          | 2,565                  | 2,367                  | 1,184         |
| <b>8</b>                                | 68,536        | 5,712          | 2,856                  | 2,636                  | 1,318         |
| For each additional family member, add: | 6,994         | 583            | 292                    | 269                    | 135           |

| <b>ELIGIBILITY SCALE FOR REDUCED-PRICE MEALS</b> |               |                |                        |                        |               |
|--------------------------------------------------|---------------|----------------|------------------------|------------------------|---------------|
| <b>185 Percent of Poverty Level</b>              |               |                |                        |                        |               |
| <b>Household Size</b>                            | <b>Income</b> |                |                        |                        |               |
|                                                  | <b>Annual</b> | <b>Monthly</b> | <b>Twice Per Month</b> | <b>Every Two Weeks</b> | <b>Weekly</b> |
| <b>1</b>                                         | 27,861        | 2,322          | 1,161                  | 1,072                  | 536           |
| <b>2</b>                                         | 37,814        | 3,152          | 1,576                  | 1,455                  | 728           |
| <b>3</b>                                         | 47,767        | 3,981          | 1,991                  | 1,838                  | 919           |
| <b>4</b>                                         | 57,720        | 4,810          | 2,405                  | 2,220                  | 1,110         |
| <b>5</b>                                         | 67,673        | 5,640          | 2,820                  | 2,603                  | 1,302         |
| <b>6</b>                                         | 77,626        | 6,469          | 3,235                  | 2,986                  | 1,493         |
| <b>7</b>                                         | 87,579        | 7,299          | 3,650                  | 3,369                  | 1,685         |
| <b>8</b>                                         | 97,532        | 8,128          | 4,064                  | 3,752                  | 1,876         |
| For each additional family member, add:          | 9,953         | 830            | 415                    | 383                    | 192           |

# NOTICE TO HOUSEHOLDS OF APPROVAL/DENIAL OF BENEFITS

Dear Parent/Guardian:

You applied for free or reduced-price meals for the following children:

|       |       |       |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

- Approved for free meals.
- Approved for reduced-price meals at \$ \_\_\_\_\_ for lunch, \$ \_\_\_\_\_ for breakfast, and \$ \_\_\_\_\_ for snacks.
- Denied for the following reason(s):
  - Income over the allowable amount
  - Incomplete application
  - Other: \_\_\_\_\_

If you do not agree with the decision, you may discuss it with the school.

If you wish to review the decision further, you have a right to a fair hearing. This can be done by calling or writing the following official:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Toll/Free, Collect, or Local Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

If you are not eligible now but have a decrease in household income, become unemployed, or have an increase in family size, fill out an application at that time.

Sincerely,

\_\_\_\_\_

(Name)

\_\_\_\_\_

(Date)

\_\_\_\_\_

(Title)

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, audiotope, 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: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, 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:

mail: U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410; or  
fax: (833) 256-1665 or (202) 690-7442; or  
email: [program.intake@usda.gov](mailto:program.intake@usda.gov)

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# Child Nutrition Programs (CNP) Roster

|     | STUDENT NAME | CATEGO-<br>RY<br>F OR R | DATE<br>AP-<br>PROVED | DATE<br>DROPPED<br>OR TRANS-<br>FERRED | STATUS CHANGE<br>AND COMMENTS |
|-----|--------------|-------------------------|-----------------------|----------------------------------------|-------------------------------|
| 1.  |              |                         |                       |                                        |                               |
| 2.  |              |                         |                       |                                        |                               |
| 3.  |              |                         |                       |                                        |                               |
| 4.  |              |                         |                       |                                        |                               |
| 5.  |              |                         |                       |                                        |                               |
| 6.  |              |                         |                       |                                        |                               |
| 7.  |              |                         |                       |                                        |                               |
| 8.  |              |                         |                       |                                        |                               |
| 9.  |              |                         |                       |                                        |                               |
| 10. |              |                         |                       |                                        |                               |
| 11. |              |                         |                       |                                        |                               |
| 12. |              |                         |                       |                                        |                               |
| 13. |              |                         |                       |                                        |                               |
| 14. |              |                         |                       |                                        |                               |
| 15. |              |                         |                       |                                        |                               |
| 16. |              |                         |                       |                                        |                               |
| 17. |              |                         |                       |                                        |                               |
| 18. |              |                         |                       |                                        |                               |
| 19. |              |                         |                       |                                        |                               |
| 20. |              |                         |                       |                                        |                               |
| 21. |              |                         |                       |                                        |                               |
| 22. |              |                         |                       |                                        |                               |
| 23. |              |                         |                       |                                        |                               |
| 24. |              |                         |                       |                                        |                               |
| 25. |              |                         |                       |                                        |                               |





**ATTACHMENT G**  
**NOTICE OF DIRECT CERTIFICATION**

---

Dear Parent/Guardian:

We want to let you know that the child(ren) in your household were directly certified through *SNAP*, *TANF*, *Medicaid*, or *FDPIR* will receive free or reduced-priced lunches, breakfasts, and snacks at school.

**The children listed on this form will receive: Free Meals  Reduced-Priced Meals**

United States Department of Agriculture (USDA) regulations require that if one person within a household is directly certified through a household member receiving SNAP, TANF, Medicaid, or FDPIR benefits, then all children within the household are directly certified.

| Name of Child | Name of School |
|---------------|----------------|
|               |                |
|               |                |
|               |                |
|               |                |
|               |                |
|               |                |
|               |                |

If there are other children enrolled in the school district in your household who are not listed above, *they also qualify for benefits*.

Please contact the school your child/children attends in the following situations:

- If there are other children in your household who are not listed above and you would like them to receive benefits at school.
- You do not want your children to have free or reduced-priced meals.
- You have any additional questions.

Name of Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Signature of School Official: \_\_\_\_\_

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Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotope, 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: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, 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:

mail: U.S. Department of Agriculture

Office of the Assistant Secretary for Civil Rights

1400 Independence Avenue, SW

Washington, D.C. 20250-9410; or

fax: (833) 256-1665 or (202) 690-7442; or email: [program.intake@usda.gov](mailto:program.intake@usda.gov)

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# DISCLOSURE CHART FOR ELIGIBILITY INFORMATION

| Recipient of Information                                                                                                                                                                                                                                      | Information That May Be Disclosed to Recipient                                     | Required Notification and Content                                                                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| <i>Child Nutrition Programs (CNP)</i> under the National School Lunch Act (NSLA) or Child Nutrition Act (CNA)                                                                                                                                                 | All eligible information                                                           | Prior notice and consent not required                                                                        |
| <i>Federal, state, or local means-tested nutrition programs</i> with eligibility standards comparable to the National School Lunch Program (NSLP)                                                                                                             | Eligibility <i>STATUS</i> Only                                                     | Prior notice and consent not required                                                                        |
| <i>Federal education programs, including Every Student Succeeds Act (ESSA)</i>                                                                                                                                                                                | Eligibility <i>STATUS</i> Only                                                     | Prior notice and consent not required                                                                        |
| <i>The WAVE</i> (Student Information System)                                                                                                                                                                                                                  | Eligibility <i>STATUS</i> Only                                                     | Prior notice and consent not required                                                                        |
| <i>State Education programs</i> , administered by a State agency or local education agency                                                                                                                                                                    | Eligibility <i>STATUS</i> Only                                                     | Prior notice and consent not required                                                                        |
| <i>Local education program</i>                                                                                                                                                                                                                                | <i>NO</i> eligibility information unless parental consent is obtained              | Must obtain parental consent                                                                                 |
| <i>Sooner Care Benefits</i> , administered by a state or local agency authorized under Title XIX or XX of the Social Security Act to identify and enroll eligible children                                                                                    | All eligibility information unless parents elect not to have information disclosed | Must give prior notice to parents and opportunity for parents to decline to have their information disclosed |
| <i>State health programs</i> other than Sooner Care administered by a State agency or local education agency.                                                                                                                                                 | Eligibility <i>STATUS</i> Only                                                     | Prior consent not required                                                                                   |
| <i>Federal health programs</i> other than Medicaid/Sooner Care                                                                                                                                                                                                | <i>NO</i> eligibility information unless parental consent is obtained              | Must obtain prior parental consent                                                                           |
| <i>Local health programs</i>                                                                                                                                                                                                                                  | <i>NO</i> eligibility information unless parental consent is obtained              | Must obtain prior parental consent                                                                           |
| <i>Comptroller General</i> of the United States for purpose of audit and examination                                                                                                                                                                          | All eligibility information                                                        | Prior notice and consent not required                                                                        |
| <i>Federal, state, or local law enforcement officials</i> investigating alleged violations of any of the programs under the NSLA or Can or investigating violations of any of the programs that are authorized to have access to names and eligibility status | All eligibility information                                                        | Prior notice and consent not required                                                                        |

SFA may use the form on the next page for parents to complete for release of eligibility information that requires parental approval.

## DISCLOSURE OF FREE AND REDUCED-PRICE INFORMATION AGREEMENT

### I. PURPOSE AND SCOPE

\_\_\_\_\_ and \_\_\_\_\_ acknowledge and agree that children’s free and reduced-price meal and free milk eligibility information obtained under provisions of the Richard B. Russell National School Lunch Act (NSLA) (42 USC 1751 et. seq.) or Child Nutrition Act of 1966 (42 USC 1771 et. seq.) (CNA) and the regulations implementing those Acts is confidential information. This Agreement is intended to ensure that any information disclosed by the \_\_\_\_\_ to the \_\_\_\_\_ about children eligible for free or reduced-price meals or free milk will be used only for purposes specified in this Agreement and that the \_\_\_\_\_ and the \_\_\_\_\_

(Insert Name of LEA) (Insert Name of Receiving Agency)

(Insert Name of LEA Agency) (Insert Name of Receiving Agency)

(Insert Name of LEA) (Insert Name of Receiving Agency)

recognize that there are penalties for unauthorized disclosures of this eligibility information.

### II. AUTHORITY

Section 9(b)(6)(A) of the NSLA (42 USC 1758[b][6][A]) authorizes the limited disclosure of children’s free or reduced-price meal or free milk eligibility information to specific programs or individuals without prior parent/guardian consent. Except that, the parent/guardian must be provided the opportunity to decline to share eligibility information prior to the disclosure for identifying children eligible for benefits under or enrolling children in the state Medicaid program and the Sooner Care program. Additionally, the statute specifies that, for any disclosures not authorized by the statute, the consent of children’s parents/guardians must be obtained prior to the disclosure.

The receiving agency certifies that it is currently authorized to administer the following program(s) and that information requested will only be used by the program(s) indicated.

***NOTE: Section 9(b)(6)(A) specifies that certain programs may receive children’s eligibility status only, without parental consent. Parental consent must be obtained to disclose any additional eligibility information. Section 9(b)(6)(D)(ii) specifies that for state Medicaid or Sooner Care, parents must be notified and given the opportunity to elect not to have information disclosed. Social security numbers may only be disclosed if households are given notice of the disclosure and the uses to be made of their social security numbers as required by Sec. 7 of the Privacy Act.***

### III. RESPONSIBILITIES

\_\_\_\_\_ will:  
(Insert Name of LEA)

- When required, secure parents/guardians consent prior to any disclosure not authorized by the NSLA or any regulations under that act, unless prior consent is secured by the receiving agency and made available to the LEA.
- For state Medicaid and Sooner Care, notify parents/guardians of potential disclosures and provide the opportunity for parents/guardians to elect not to have information disclosed.
- Disclose eligibility information only to persons directly connected to the administration or enforcement of programs authorized access under the NSLA or regulations under the Act or to programs or services for which parents/guardians gave consent.

\_\_\_\_\_ will:  
(Insert Name of Receiving Official)

- Ensure that only persons who are directly connected with the administration or enforcement of the \_\_\_\_\_ and whose job responsibilities require use of \_\_\_\_\_ (Insert Name of the Program) the eligibility information will have access to children’s eligibility information:

- Specify by name(s) or title(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Use children’s free and reduced-price eligibility information for the following specific purpose(s):  
(Describe): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Inform all persons that have access to children’s free and reduced-price meal eligibility information that the information is confidential, that children’s eligibility information must only be used for purposes specified above, and the penalties for unauthorized disclosures.  
\_\_\_\_\_  
\_\_\_\_\_

- Protect the confidentiality of children’s free and reduced-price meal or free milk eligibility information as follows:  
\_\_\_\_\_  
\_\_\_\_\_

- Specifically describe how the information will be protected from unauthorized uses and further disclosures.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Description of Procedures to Transfer Meal Eligibility Information** (May be completed by either the LEA or receiving agency)

Describe the procedures for transferring students' meal-eligibility information from the LEA to the requesting agency/program so as to limit the number of individuals who have access to the information.

(Describe): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IV. EFFECTIVE DATES**

This agreement shall be effective from \_\_\_\_\_ to \_\_\_\_\_.

**V. PENALTIES**

Any person who publishes, divulges, discloses, or makes known in any manner, or to any extent not authorized by federal law (§9[b][6][C] of the NSLA; 42 USC 1758[b][6][C]) or a regulation, any information about a child's eligibility for free or reduced-price meals or free milk shall be fined not more than \$1,000 or imprisonment of not more than one year or both.

**VI. SIGNATURES**

The parties acknowledge that children's free or reduced-price meal and free milk eligibility information may be used only for the specific purposes stated; that unauthorized use of free or reduced-price meal and free milk information or further disclosure to other persons or programs is prohibited and a violation of federal law which may result in civil and criminal penalties.

**Requesting Agency/Program Administrator**

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**LEA Administrator**

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**NOTE: Any attachments will become part of this agreement.**

## VERIFICATION RESPONSE WORKSHEET

*This form MUST be used and kept on file if selecting an alternate sample size for verification. Approval of the alternate sample size is granted by the State agency if all required conditions are met.*

School Food Authority (SFA): \_\_\_\_\_ County/District Code: \_\_\_\_\_

For all SFAs except Oklahoma City Public Schools and Tulsa Public Schools:

1. Current School Year: \_\_\_\_\_
2. Number of applications on file as of October 1: \_\_\_\_\_

1. Previous School Year: \_\_\_\_\_
2. Number of applications selected for verification in previous school year: \_\_\_\_\_
3. Number of responses from verification in the previous school year: \_\_\_\_\_
4. \_\_\_\_\_ x .80 = \_\_\_\_\_  
Number of applications from verification in the previous year (#2 answer) Required response rate

If Item 3 is equal to or exceeds the product in Item 4, the SFA may use any verification method in the current school year.

## VERIFICATION RESPONSE WORKSHEET

### Oklahoma City/Tulsa Public Schools Only

*This form MUST be used and kept on file if selecting an alternate sample size for verification. Approval of the alternate sample size is granted by the State agency if all required conditions are met. For the purposes of verification, large SFAs are only those that have 20,000 or more free or reduced-price applications on file as of October 1 in any given year.*

|    |                                                                                                                                     |
|----|-------------------------------------------------------------------------------------------------------------------------------------|
| 1. | Current School Year: _____                                                                                                          |
| 2. | Number of applications on file as of October 1: _____                                                                               |
|    | <small>This number should be the same as the sum of Items 4.2, 4.3, and 5 under Column B of the Summary Verification Report</small> |

|                                                                                               |                                                                                                                                                                            |
|-----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1.                                                                                            | Previous School Year: _____                                                                                                                                                |
| 2.                                                                                            | Number of applications selected for verification: _____                                                                                                                    |
| 3.                                                                                            | Number of households (applications) that did not respond: _____                                                                                                            |
| 4.                                                                                            | $\frac{\text{Number 3}}{\text{Number 2}} = \text{Nonresponse rate from the previous school year}$                                                                          |
| 5.                                                                                            | Second Preceding School Year: _____                                                                                                                                        |
| 6.                                                                                            | Number of applications selected for verification: _____                                                                                                                    |
| 7.                                                                                            | Number of households (applications) that did not respond: _____                                                                                                            |
| 8.                                                                                            | $\frac{\text{Number 7}}{\text{Number 6}} = \text{Nonresponse rate from the second preceding school}$                                                                       |
| 9.                                                                                            | $\frac{\text{2nd preceding year nonresponse rate}}{\text{Number 8 answer}} \times .10 = \text{Percentage of improvement needed}$                                           |
| 10.                                                                                           | $\frac{\text{2nd preceding year nonresponse rate (Number 8 answer)}}{\text{Previous year nonresponse rate (Number 4 answer)}} = \text{(+/-) Nonresponse rate improvement}$ |
| <p>If Number 10 is greater than Number 9, then the SFA may use the alternate sample size.</p> |                                                                                                                                                                            |

# CONFIRMATION REVIEW OF BENEFITS NOTIFICATION AND ADVERSE ACTION

Children's Names: \_\_\_\_\_

School: \_\_\_\_\_ Date: \_\_\_\_\_

Dear \_\_\_\_\_ :

We have completed a confirmation review of your children's eligibility. This review brought to our attention that an error was made in the children's initial determination of benefits. Starting \_\_\_\_\_ your children's eligibility for meal benefits will be: (10 calendar days from the date sent)

Changed from free to reduced-price. The reduced-price charge is \_\_\_\_\_ cents for lunch and \_\_\_\_\_ cents for breakfast.

Stopped for the following reason(s): \_\_\_\_\_

Starting immediately, your children's eligibility for meal benefits will be:

Changed from reduced-price to free. Your children will receive meals at no cost.

If you are not eligible for benefits now but have a decrease in household income, become unemployed, or have an increase in the size of your household, you may fill out a form at that time to reapply for benefits.

If you do not agree with the decision, you may discuss it with \_\_\_\_\_ (Verifying Official)

You also have the right to a fair hearing. If you request a hearing by \_\_\_\_\_ (Date)

your children will continue to receive \_\_\_\_\_ (Free or Reduced-Price Meals) until the decision

of the hearing official is made. You may request a fair hearing by calling or writing the following official:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Toll-Free/Collect/Local Telephone Number: \_\_\_\_\_ (Circle One)

Sincerely,

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: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, 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:

**mail:** U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410; or  
**fax:** (833) 256-1665 or (202) 690-7442; or **email:** [program.intake@usda.gov](mailto:program.intake@usda.gov)

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## NOTIFICATION OF SELECTION FOR VERIFICATION OF ELIGIBILITY WE MUST CHECK YOUR APPLICATION

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You must send the information we need, or contact *(Name)* by *(Date)*, or your child(ren) will stop getting free or reduced-price meals.

School: \_\_\_\_\_ Date: \_\_\_\_\_

Dear \_\_\_\_\_ :

We are checking your Free and Reduced-Price School Meals Application. Federal rules require that we do this to make sure only eligible children get free or reduced-price meals. You must send us information to prove that *(Name[s] of Child[ren]) is/are* eligible.

If possible, send copies, not original papers. If you do send originals, they will be sent back to you only if you ask.

1. IF YOU WERE RECEIVING BENEFITS FROM **(SNAP)**, **(TANF)**, OR **(FDPIR)** WHEN YOU APPLIED FOR FREE OR REDUCED-PRICE MEALS, OR AT ANY TIME SINCE THEN, SEND US A COPY OF ONE OF THESE:

- **(SNAP)**, **(TANF)**, or **(FDPIR)** Certification of Notice that shows dates of certification.
- Letter from **(SNAP)**, **(TANF)**, or **(FDPIR)** office that shows dates of certification.
- Do not send your EBT card.

2. IF YOU GET THIS LETTER FOR A HOMELESS, MIGRANT, RUNAWAY, OR HEAD START CHILD, PLEASE CONTACT ***(School, Homeless Liaison; Runaway, Migrant, or Head Start Coordinator)*** \_\_\_\_\_ FOR HELP.

3. IF THE CHILD IS A FOSTER CHILD: Provide written documentation that verifies the child is the legal responsibility of the agency or court, or provide the name and contact information for a person at the agency or court who can verify that the child is a foster child.

4. IF NO ONE IN YOUR HOUSEHOLD RECEIVES **(SNAP)**, **(TANF)**, OR **(FDPIR)** BENEFITS: Send this page along with papers that show the amount of money your household gets from each source of income. The papers you send must show the **NAME** of the person who received the income, the **DATE** it was received, **HOW MUCH** was received, and **HOW OFTEN** it was received. ***Send information to: (Address)***

***Acceptable papers include:***

***JOBS:*** Paycheck stub or pay envelope that shows the amount and how often pay is received; letter from employer stating gross wages and how often you are paid; or, if you work for yourself, business or farming papers such as ledger or tax books.

***SOCIAL SECURITY, PENSIONS, or RETIREMENT:*** Social Security retirement benefit letter, statement of benefits received, or pension award notice.

**UNEMPLOYMENT, DISABILITY, or WORKER'S COMP:** Notice of eligibility from state employment security office, check stub, or letter from the Worker's Compensation office.

**WELFARE PAYMENTS:** Benefit letter from the **(TANF)** office.

**CHILD SUPPORT or ALIMONY:** Court decree, agreement, or copies of checks received.

**OTHER INCOME (SUCH AS RENTAL INCOME):** Information that shows the amount of income received, how often it is received, and the date received.

**NO INCOME:** A brief note explaining how you provide food, clothing, and housing for your household and when you expect an income.

**MILITARY HOUSING PRIVATIZATION INITIATIVE:** Letter or rental contract showing that your housing is part of the Military Privatized Housing Initiative.

**TIME FRAME OF ACCEPTABLE INCOME DOCUMENTATION:** Please submit proof of one month's income; you could use the month prior to application, the month you applied, or any month after that.

If you have questions or need help, please call **(Name)** at **(Telephone Number)**. The call is free. **(Toll Free or Reverse Charge Explanation)** You may also e-mail us at **(E-Mail Address)**.

Sincerely,

**(Signature)**

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, audiotope, 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: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, 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:

**mail:** U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410; or

**fax:** (833) 256-1665 or (202) 690-7442; or

**email:** [program.intake@usda.gov](mailto:program.intake@usda.gov)

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# DIRECT CERTIFICATION/VERIFICATION FORM

## LETTER TO THE SNAP, TANF, FOSTER, OR FDPIR OFFICE FROM THE SCHOOL FOOD AUTHORITY

Date: \_\_\_\_\_

Dear \_\_\_\_\_ :

The regulations for the *Supplemental Nutritional Assistance Program (SNAP)*, *Temporary Assistance to Needy Families (TANF)*, and *Food Distribution Program on Indian Reservations (FDPIR)* permit SNAP, TANF, Foster, and FDPIR offices to release eligibility information to administrators of the National School Lunch and School Breakfast Programs to ensure that only eligible children receive free meal benefits.

The receipt of SNAP, TANF, Foster, and/or FDPIR automatically qualifies children for free school meals. Enclosed is a listing of approved free meal applicants who have been selected for verification and who have indicated that the child for whom application was made now receives SNAP, TANF, Foster, and/or FDPIR benefits. On the enclosed listing, please indicate if these household members are currently participating in the SNAP, TANF, Foster, and/or FDPIR program(s). This information will be used only to confirm the approved applicant's eligibility for free meal benefits.

The information used for direct verification must be the *most recent information available* that is defined as data that is no older than 180 days prior to the date of the free and reduced-price application. To be consistent with policy established for *regular* verification, direct verification efforts may use information from any point in time between the month prior to application and the time the LEA conducts direct verification.

Your prompt return of the listing will be appreciated. A self-addressed return envelope is also enclosed for your convenience. If you have any questions or need additional information, please contact:

\_\_\_\_\_ at telephone number \_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Name of District Requesting This Information:

Enclosures

*To ensure better accuracy, consider e-mailing the front page of the Application for Free and Reduced-Price Meals as well as this form.*



## VERIFICATION RESULTS/ADVERSE ACTION WE HAVE CHECKED YOUR APPLICATION

---

School: \_\_\_\_\_

Date: \_\_\_\_\_

Dear: \_\_\_\_\_

We checked the information you sent us to prove that *(Name[s] of Child[ren])* is/are eligible for free or reduced-price meals and have decided that:

- Your child(ren)'s eligibility has not changed.
- Starting *(Date)*, your child(ren)'s eligibility for meals will be changed *from reduced-price to free* because your income is within the free meal-eligibility limits. Your child(ren) will receive meals at no cost.
- Starting *(Date)*, your child(ren)'s eligibility for meals will be changed from *free to reduced-price* because your income is over the limit. Reduced-price meals cost *(\$)* for lunch and *(\$)* for breakfast.
- Starting *(Date)*, *your child(ren) is/are no longer eligible* for free or reduced-price meals for the following reason(s):
  - \_\_\_ Records show that no one in your household received **(SNAP)**, **(TANF)**, or **(FDPIR)** benefits.
  - \_\_\_ Records show that the child(ren) is/are not homeless, runaway, migrant, or Head Start.
  - \_\_\_ Your income is over the limit for free or reduced-price meals.
  - \_\_\_ You did not provide: \_\_\_\_\_
  - \_\_\_ You did not respond to our request.

Meals cost *(\$)* for lunch and *(\$)* for breakfast. If your household income goes down or your household size goes up, you may apply again. If you were previously denied benefits because no one in the household received **(SNAP)**, **(TANF)**, or **(FDPIR)** benefits, you may reapply based on income eligibility. If you did not provide proof of current eligibility, you will be asked to do so if you reapply.

If you disagree with this decision, you may discuss it with *(Name)* at *(Phone)*. You also have the right to a fair hearing. If you request a hearing by *(Date)*, your child(ren) will continue to receive free or reduced-price meals until the decision of the hearing official is made. You may request a hearing by calling or writing to: *(Name)*, *(Address)*, *(Phone Number)*, or *(E-Mail)*.

Sincerely,

*(Signature)*

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**email:** [program.intake@usda.gov](mailto:program.intake@usda.gov)

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# EXAMPLE OF VERIFICATION SUMMARY REPORT

| SECTION 1        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | A. Number of Schools OR Institutions  | B. Number of Students |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------|------|---|-------|--|---------------|----|------------------|----|----------|--|---------|--|---------|--|--------|--|------------|--|---------------|--|----------------------------------------------------|
| SECTION 1        | <b>**All SFAs must report Section 1**</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | 1-1: Total Schools ( <i>Do not include RCCIs</i> ):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 12                                    | 5,135                 |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | 1-2: Total RCCIs ( <i>Do not include schools counted in 1-1</i> ):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 0                                     |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | 1-2a: RCCIs with day students ( <i>Report ONLY day students in 1-2a</i> ):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | 1-2b: RCCIs with NO day students:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| SECTION 2        | <b>**ONLY SFAs with alternative provisions must report Section 2**</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | A. Number of Schools AND Institutions | B. Number of Students |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| SECTION 2        | 2-1: Operating Provision 2/3 in a BASE year for NSLP and SBP:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 0                                     | 0                     |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | 2-2: Operating Provision 2/3 in a NON BASE year for NSLP and SBP:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 0                                     | 0                     |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | 2-2a: Provision 2/3 students reported as FREE in a NON BASE year:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                       | 0                     |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | 2-2b: Provision 2/3 students reported as REDUCED PRICE in a NON BASE year:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                       | 0                     |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | 2-3: Operating the Community Eligibility Option:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 1                                     | 255                   |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | 2-4: Operating other alternatives for NSLP and SPB:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 0                                     | 0                     |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | 2-5: Operating an alternative provision(s) for only SPB or only NSLP:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 0                                     | 0                     |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| SECTION 3        | <b>**ALL SFAs must report section 3 or check box 3-1 if applicable**</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| SECTION 3        | 3-1: <input checked="" type="checkbox"/> <b>**ALL SFAs must report section 3 or check box 3-1 if applicable**</b><br>Check the box only if all schools and/or RCCIs in the SFA were not required to perform direct certification <b>with SNAP</b> (i.e. NON BASE year Provision 2/3 for all schools)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | B. Number of FREE or REDUCED Students |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | 3-2: Students directly certified through Supplemental Nutrition Assistance Program (SNAP):<br><i>Do not include students certified with SNAP through the letter method.</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 0                                     |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | 3-3: Students directly certified through Other Programs: <i>Include those directly certified through Temporary Assistance for Needy Families (TANF), Food Distribution Program on Indian Reservations (FDPIR), or Medicaid (if applicable, those documented as homeless, migrant, runaway, foster, Head Start, or non-applicant but approved by local officials. DO NOT include SNAP students already reported in 3-2.</i><br><i>Do not include students certified with SNAP through the letter method.</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 101                                   |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Program</th> <th style="width: 50%;">Students</th> </tr> </thead> <tbody> <tr><td style="text-align: center;">TANF</td><td style="text-align: center;">3</td></tr> <tr><td style="text-align: center;">FDPIR</td><td></td></tr> <tr><td style="text-align: center;">Medicaid Free</td><td style="text-align: center;">64</td></tr> <tr><td style="text-align: center;">Medicaid Reduced</td><td style="text-align: center;">34</td></tr> <tr><td style="text-align: center;">Homeless</td><td></td></tr> <tr><td style="text-align: center;">Migrant</td><td></td></tr> <tr><td style="text-align: center;">Runaway</td><td></td></tr> <tr><td style="text-align: center;">Foster</td><td></td></tr> <tr><td style="text-align: center;">Head Start</td><td></td></tr> <tr><td style="text-align: center;">Non-Applicant</td><td></td></tr> </tbody> </table> | Program                               | Students              | TANF | 3 | FDPIR |  | Medicaid Free | 64 | Medicaid Reduced | 34 | Homeless |  | Migrant |  | Runaway |  | Foster |  | Head Start |  | Non-Applicant |  | (See table to the left for a breakdown by program) |
| Program          | Students                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| TANF             | 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| FDPIR            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| Medicaid Free    | 64                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| Medicaid Reduced | 34                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| Homeless         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| Migrant          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| Runaway          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| Foster           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| Head Start       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
| Non-Applicant    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                       |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |
|                  | 3-4: Students certified categorically FREE eligible through SNAP letter method: <i>Include student certified for free meals through the family providing a letter from the SNAP agency.</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 0                                     |                       |      |   |       |  |               |    |                  |    |          |  |         |  |         |  |        |  |            |  |               |  |                                                    |

|                  |                                                                                            |                                                                                                                                                          |                                  |                              |
|------------------|--------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|------------------------------|
| <b>SECTION 4</b> | <b>Students approved as FREE or REDUCED PRICE eligible through a household application</b> | <b>**All SFA/RCCIs collecting applications must report Section 4**</b>                                                                                   | <b>A. Number of Applications</b> | <b>B. Number of Students</b> |
|                  |                                                                                            | <b>4-1: Approved as categorically FREE Eligible: Based on those providing documentation (e.g. a case number for SNAP, TANF, FDPIR on an application)</b> | 0                                | 0                            |
|                  |                                                                                            | <b>4-2: Approved as FREE eligible: Based on household size and income information</b>                                                                    | 0                                | 0                            |
|                  |                                                                                            | <b>4-3: Approved as REDUCED PRICE eligible: Based on household size and income information</b>                                                           | 0                                | 0                            |

|                                                    |  |                                                             |   |
|----------------------------------------------------|--|-------------------------------------------------------------|---|
| <b>T-1: Total FREE Eligible Students Reported:</b> |  | <b>T-2: Total REDUCED PRICE Eligible Students Reported:</b> | 0 |
|----------------------------------------------------|--|-------------------------------------------------------------|---|

|                                                                                                                                                                                                                      |                                             |                                                                                                                                                                                                                                                                                                                                                      |                                                                      |   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|---|
| <b>5-1: <input checked="" type="checkbox"/> **All SFA/RCCIs must report Section 5 or check box 5-1 if applicable**</b>                                                                                               |                                             |                                                                                                                                                                                                                                                                                                                                                      |                                                                      |   |
| Check the box if ALL Schools and/or RCCIs are exempt from verification (see instructions for list of exemptions). If 5-1 is checked, no further reporting in Section 5 is required.                                  |                                             |                                                                                                                                                                                                                                                                                                                                                      |                                                                      |   |
| <b>5-2: Was Verification performed and completed?</b>                                                                                                                                                                |                                             | <b>5-3: Type of Verification Used:</b>                                                                                                                                                                                                                                                                                                               |                                                                      |   |
| <input type="checkbox"/> Yes, completed by November 15<br><input type="checkbox"/> Yes, completed after November 15<br><input type="checkbox"/> No, Verification was NOT performed or the process was not completed. |                                             | 1. <input type="checkbox"/> Standard (Lesser of 3% or 3,000 error-prone)<br>2. <input type="checkbox"/> Alternate One (Lesser of 3% or 3,000 selected randomly)<br>3. <input type="checkbox"/> Alternate Two (Lesser of 1% or 1,000 error-prone applications PLUS lesser of one-half percent or 500 applications with SNAP/TANF/ FDPIR case numbers) |                                                                      |   |
| If 1 or 3 is checked in 5-3, report 5-4<br>If 2 is checked in 5-3, enter "N/A" in 5-4                                                                                                                                | <b>5-4: Total ERROR PRONE applications:</b> | 0                                                                                                                                                                                                                                                                                                                                                    | <b>5-5: Number of applications selected for Verification sample:</b> | 0 |
| Report all applications as of October 1st considered error prone                                                                                                                                                     |                                             |                                                                                                                                                                                                                                                                                                                                                      |                                                                      |   |

|                                                                                                                                                                                    |                                  |                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|----------------------------------|
| <b>5-6: <input checked="" type="checkbox"/> ** ALL SFAs must report 5-7 or check box 5-6 if applicable*</b>                                                                        | <b>A. Number of Applications</b> | <b>A. Number of Applications</b> |
| Check the box if direct verification was not conducted in the SFA (i.e. not one of the schools and/or RCCIs in the SFA performed direct verification) If 5-6 is checked, skip 5-7. |                                  |                                  |
| Report if FREE and/or REDUCED PRICE eligibility is confirmed through direct verification with SNAP, TANF, FDPIR, or MEDICAID as of November 15th                                   | 0                                | 0                                |
| <b>5-7 Confirmed through direct verification:</b>                                                                                                                                  |                                  |                                  |

|                                   |                                                                                                                                                                                                                                    |                        |                                   |                                                                                                 |                        |                                   |                                                                                                                  |                        |                    |
|-----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-----------------------------------|-------------------------------------------------------------------------------------------------|------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------|--------------------|
| <b>SECTION 5</b>                  | <b>5-8: Results of Verification by Original Benefit Type</b>                                                                                                                                                                       |                        |                                   |                                                                                                 |                        |                                   |                                                                                                                  |                        |                    |
|                                   | For each original benefit type (A, B, & C), report the number of applications and students as of November 15th for each result category (1, 2, 3, & 4). Do NOT include students and applications already reported in 5-7A or 5-7B. |                        |                                   |                                                                                                 |                        |                                   |                                                                                                                  |                        |                    |
|                                   | <b>A. FREE - Categorically Eligible</b><br><i>Certified as FREE based on SNAP/TANF/ FDPIR documentation (e.g. case number) on application</i>                                                                                      |                        |                                   | <b>B. FREE - Income</b><br><i>Certified as FREE based on income/ household size application</i> |                        |                                   | <b>A. REDUCED PRICE - Income</b><br><i>Certified as REDUCED PRICE based on income/household size application</i> |                        |                    |
|                                   | <b>Result Category</b>                                                                                                                                                                                                             | <b>a. Applications</b> | <b>b. Students</b>                | <b>Result Category</b>                                                                          | <b>a. Applications</b> | <b>b. Students</b>                | <b>Result Category</b>                                                                                           | <b>a. Applications</b> | <b>b. Students</b> |
|                                   | 1. Responded, NO CHANGE                                                                                                                                                                                                            | 0                      | 0                                 | 1. Responded, NO CHANGE                                                                         | 0                      | 0                                 | 1. Responded, NO CHANGE                                                                                          | 0                      | 0                  |
|                                   | 2. Responded, Changed to REDUCED                                                                                                                                                                                                   | 0                      | 0                                 | 2. Responded, Changed to REDUCED                                                                | 0                      | 0                                 | 2. Responded, Changed to REDUCED                                                                                 | 0                      | 0                  |
|                                   | 3. Responded, Changed to PAID                                                                                                                                                                                                      | 0                      | 0                                 | 3. Responded, Changed to PAID                                                                   | 0                      | 0                                 | 3. Responded, Changed to PAID                                                                                    | 0                      | 0                  |
| 4. NOT Responded, Changed to PAID | 0                                                                                                                                                                                                                                  | 0                      | 4. NOT Responded, Changed to PAID | 0                                                                                               | 0                      | 4. NOT Responded, Changed to PAID | 0                                                                                                                | 0                      |                    |

|                                                                                                                                                                                                                                 |     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| <b>VC-1: Total questionable applications verified for cause</b> (Enter N/A if not applicable):<br>Report the number of applications as of November 15th verified for cause <b>in addition</b> to the verification requirements. | N/A |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|

# Additional Instructions for Verification Summary Report

For additional guidance on verification requirements and procedures, refer to the Eligibility Manual (<http://www.fns.usda.gov/cnd/guidance/EliMan.pdf>). Enter the State agency name, SFA name, SFA ID, SFA city, SFA zip code for each SFA with schools and/or RCCIs operating the NSLP and/or SBP. Select if the SFA overall is a public or a private/nonprofit entity, and enter the school year for which the report is completed. Include schools and/or RCCIs and the enrolled students *only once* if operating both NSLP and SBP.

|                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Section 1</b> | <p>All SFAs with schools or RCCIs operating the NSLP and/or SBP must complete this section regardless if all schools are exempt from verification. Report schools or institutions operating the NSLP and/or SBP and students <b>with access to the NSLP and/or SBP as of October 31st.</b></p> <p><b>1-1A &amp; B:</b> TOTAL number of schools (not including RCCIs) operating the NSLP and/or SBP and the TOTAL number of enrolled students with access to the NSLP and/or SBP as of October 31st.</p> <p><b>1-2A &amp; B:</b> TOTAL number of RCCIs operating the NSLP and/or SBP and the TOTAL number of enrolled students with access to the NSLP and/or SBP in RCCIs.</p> <p><b>1-2aA &amp; 1-2aB:</b> Of the RCCIs reported in 1-2A, enter the number of RCCIs with DAY students and ONLY the DAY students with access to the NSLP and/or SBP in RCCIs (day students are those students NOT institutionalized and eligibility is determined individually by application or direct certification as applicable).</p> <p><b>1-2bA &amp; 1-2bB:</b> Of the RCCIs reported in 1-2A, enter the number of RCCIs with NO day students and the TOTAL number of institutionalized students.</p> <p><b>Note:</b> <i>The sum of the students reported in 1-2aB and 1-2bB will NOT equal the total in 1-2B.</i></p> |
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|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Section 2</b> | <p>All SFAs with some or all schools and/or RCCIs operating under an alternative provision must complete this section. For RCCIs operating an alternate provision, include both day and residential students. Report students with access to the NSLP and/or SBP <b>as of October 31st.</b> 2-1 through 2-4 should be reported only if the school operates alternate provisions for BOTH programs, resulting in no collection of applications for the school. Schools operating Provision 2/3 for only one program and collecting household applications for the other program should report applicable provision data in 2-5.</p> <p><b>2-1A &amp; B:</b> BASE year is when certification procedures are conducted.</p> <p><b>2-2A &amp; B:</b> NONBASE year is when <b>NO</b> certification procedures are conducted.</p> <p><b>2-2aB &amp; 2-2bB:</b> Multiply the most recent base year FREE percentage by the enrollment reported in 2-2B to determine 2-2aB. Multiply the base year REDUCED-PRICE percentage by the enrollment reported in 2-2B to determine 2-2bB.</p> <p><b>2-3A &amp; B:</b> Number of schools operating the Community Eligibility Option and the number of enrolled students in the schools with access to the NSLP and/or SBP.</p> <p><b>2-4A &amp; B:</b> Other alternatives include Provision 1 and universal meal service through census data or socioeconomic surveys.</p> <p><b>2-5A &amp; B:</b> Enter the number of schools and/or RCCIs and students enrolled operating an alternate provision for <b>ONLY SBP</b> or <b>ONLY NSLP</b>. Include schools/RCCIs operating in both a base year and nonbase year.</p> |
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|                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Section 3</b> | <p>All SFAs must complete this section. If all schools and/or RCCIs in the SFA were not required to perform Direct Certification with SNAP, then check Box</p> <p><b>3-1. Check the box only if the entire district is CEP and/or Provision 2 or 3 in a NONBASE year.</b> All schools in the SFA and/or RCCIs were not required to perform direct certification with SNAP, TANF, or Medicaid. Direct certification is the process by which the student is certified eligible based on documentation received directly from the applicable program (e.g. SNAP, TANF, or Medicaid agency). This process eliminates the need for the household to submit an application. Report students approved FREE eligible as of the last operating day in October</p> <p><b>3-2B:</b> Include students <i>directly certified</i> with SNAP. If a student is directly certified with SNAP as well as with another program (e.g., TANF/eligible homeless), include the student in <b>THIS</b> SNAP count (3-2B). Also include in this count any student in the SFA deemed eligible based on extended categorical eligibility via an eligible student in the primary household who has been directly certified with SNAP. <b>DO NOT</b> include SNAP letter method certifications in this SNAP count; report these in 3-4B below. (SNAP letter method certifications are when the family submits a letter from the SNAP agency to document receipt of SNAP benefits. This is no longer considered to be Direct Certification.)</p> <p><b>3-3B:</b> Include students directly certified through programs other than SNAP. Include students in the SFA deemed eligible due to extended categorical eligibility via an eligible student in the primary household directly certified with TANF, FDPIR, Medicaid, Homeless, Migrant, and Runaway. <b>DO NOT</b> include SNAP students already reported in 3-2 or to be reported in 3-4 as certified categorically through SNAP letter method.</p> <p><b>3-4B:</b> Include ONLY students certified as categorically FREE eligible based on a letter submitted by family from the SNAP agency. Include students in the SFA deemed eligible due to extended categorical eligibility via an eligible student in the primary household certified as FREE categorically eligible with the letter method with SNAP.</p> |
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|                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Section 4</b> | <p>All SFAs and/or RCCIs collecting individual household applications must report this section, including schools and/or RCCIs in a Provision 2/3 base year. Report number of <b>applications (A) approved as of October 1.</b> Report number of <b>students (B) as of October 31st.</b></p> <p><b>4-1A &amp; B:</b> Number of applications approved FREE eligible based on documentation submitted on an application (i.e., case number for SNAP, TANF, or FDPIR on an application) on file as of October 1 and the number of students as of the last operating day in October approved FREE eligible based on documentation submitted on an application (i.e., case number for SNAP, TANF, or FDPIR on an application). <b>Include students in the SFA deemed eligible due to extended categorical eligibility via an eligible student in the primary household categorically FREE eligible with SNAP, TANF, or FDPIR.</b></p> <p><b>4-2A &amp; B:</b> Number of applications approved FREE eligible based on income information submitted by the household on file as of October 1 and the number of students as of the last operating day in October approved FREE eligible based on income information submitted by the household.</p> <p><b>4-3A &amp; B:</b> Number of applications approved REDUCED-PRICE eligible based on income information submitted by the household on file as of October 1 and the number of students as of the last operating day in October approved REDUCED-PRICE eligible based on income information submitted by the household.</p> |
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**T-1:** Enter the total number of students reported as FREE eligible.  
 (3-2B) + (3-3B) + (3-4B) + (4-1B) + (4-2B) + (2-2aB, if applicable)

**T-2:** Enter the total number of students reported as REDUCED-PRICE eligible: (4-3B) + (2-2bB, if applicable)

**Section 5**

If **ALL** schools and/or RCCIs in the SFA are exempt from verification activities, check Box 5-1 and no further reporting is required in Section 5. Verification activities are **NOT** required for:

- Schools/RCCIs in which **ALL** children have been certified under direct certification procedures, including children **DOCUMENTED** as eligible foster, migrant, runaway, or homeless children.
- RCCIs which do not have day students.
- Schools electing the Community Eligibility Option.
- Schools/RCCIs in which FNS has approved universal meal service through census data or using socioeconomic surveys; e.g., special cash assistance claims based on economic statistics regarding per capita income (Puerto Rico and the Virgin Islands).
- Schools participating only in the Special Milk Program.
- Schools in which all children are served with no separate charge for food service and no special cash assistance is claimed (i.e., nonpricing programs claiming only the paid rate of reimbursement).
- All schools are Provision 2/3 schools in a nonbase year.
- Schools which do not have any free or reduced-price eligible students.
- Other FNS-determined exemptions on a case-by-case basis.

**Select one box in (5-2 and 5-3):**

**5-2:** Indicate whether verification was performed and completed by the deadline of November 15. If verification was completed after the deadline, report the remainder of Section 5 was applicable.

**5-3:** If verification was completed, check the type of verification process used to comply with the requirements of 7 CFR 245.6a. Please note the qualification requirements in 7 CFR 245.6a(d) must be met to use the two alternate sample sizes.

- **Standard:** Verify 3% or 3,000 of approved applications, whichever is less, selected from error-prone applications on file as of October 1. If there are not enough error-prone applications, LEAs must select at random additional applications to complete sample size.
- **Alternate one:** Verify 3% or 3,000, whichever is less, of all randomly selected approved applications on file as of October 1.
- **Alternate two:** Verify the lesser of 1% or 1,000 approved applications as of October 1 selected from error-prone applications **PLUS** the lesser of one-half of 1% or 500 applications approved as of October 1 that provided a case number in lieu of income.

**5-4:** Error-prone applications are household applications approved as of October 1 indicating monthly income within \$100 of the monthly limit or annual income within \$1,200 of the annual limit of the applicable income-eligibility guidelines.

**5-5:** Enter the total number of applications initially selected for the verification process as indicated in 5-3.

**5-6:** Check if direct verification was not conducted in the SFA (not one school in the SFA conducted direct verification). Direct verification is using records from public agencies to verify income and/or Program participation.

**5-7A & B:** Only report applications and students if FREE and/or REDUCED-PRICE eligibility is confirmed through direct verification.

**5-8:** For the purposes of this report, verification is complete:

- For households whose eligibility does not change as of the date of the confirmation of eligibility by a reviewing official.
- For households which do not appeal a change in eligibility as of the first operating day following the last date for filing an appeal in response to a notice of change of eligibility.
- For households which appeal a change in eligibility as of the first operating day following a decision by the hearing official.

**Responded:** The household provided sufficient documentation. This includes verbal or written notification that the household declines benefits.

**NOT Responded:** The household did not provide sufficient documentation or the household did not provide a response.

**A1, B1, and C1:** Number of applications with no change and the number of students on these applications.

**A2 and B2:** Number of applications changed to REDUCED-PRICE based on sufficient documentation provided by the household and the number of students on the applications.

**C2:** Number of applications changed to FREE based on sufficient documentation provided by the household and the number of students on the applications.

**A3, B3, and C3:** Number of applications for which the eligibility was changed to PAID based on sufficient documentation by the household and the number of students on the applications.

**A4, B4, and C4:** Number of applications for which the eligibility was changed to PAID because documentation necessary to complete the verification process was NOT provided and the number of students on the applications.

The number of applications reported in 5-8 should include both the results of verification from verification process and the results from any applications verified for cause reported in VC-1.

**VC-1:** If applicable in at least one school and/or RCCI, report all applications verified for cause outside of the verification process (7 CFR 245.6a) as of November 15. Applications verified for cause are NOT considered part of the required sample size. Include the results of verification for cause by original benefit type in the appropriate category in 5-8.

# Notes

## ELIGIBILITY SECTION INDEX

|                                                                                 |                   |
|---------------------------------------------------------------------------------|-------------------|
| Administration General Requirements . . . . .                                   | E-4               |
| Adopted Child . . . . .                                                         | E-24              |
| Adopted Child Subsidy . . . . .                                                 | E-25              |
| Adverse Action . . . . .                                                        | E-45, E-73        |
| Adverse Action Letter (Verification) . . . . .                                  | E-78              |
| Alimony . . . . .                                                               | E-25              |
| Alternate Sample Size (Verification) . . . . .                                  | E-40-41           |
| Amendments . . . . .                                                            | E-5               |
| Appeal (Verification) . . . . .                                                 | E-45              |
| Application for Free and Reduced-Price Meals . . . . .                          | E-11-12, E-59-60  |
| Application Information . . . . .                                               | E-14-15           |
| Applications . . . . .                                                          | E-11              |
| Application Duration . . . . .                                                  | E-20-21           |
| Application Q & A . . . . .                                                     | E-53-54           |
| Approval or Denial of Application/Benefits . . . . .                            | E-19, E-63        |
| Assistance Programs . . . . .                                                   | E-6               |
| <br>                                                                            |                   |
| Bankruptcy . . . . .                                                            | E-26              |
| Benefits During Appeal . . . . .                                                | E-45              |
| <br>                                                                            |                   |
| Carryover Applications . . . . .                                                | E-15              |
| Categorical Eligibility . . . . .                                               | E-6, E-8, E-11-12 |
| Categorical Eligibility (Extension to Other Members of the Household) . . . . . | E-7               |
| Change in Benefits . . . . .                                                    | E-44              |
| Child Attending Institution . . . . .                                           | E-24              |
| Child Away at School . . . . .                                                  | E-24              |
| Child Living w/One Parent, Relatives, Friends . . . . .                         | E-24              |
| Child Support . . . . .                                                         | E-25              |
| Child's Income . . . . .                                                        | E-25              |
| Collateral Contracts . . . . .                                                  | E-43              |
| Computing of Current Income . . . . .                                           | E-18              |
| Computerized Application Approval . . . . .                                     | E-22-23           |
| Confidentiality Disclosure of Eligibility Information—Q & A . . . . .           | E-51              |
| Confidentiality/Disclosure of Eligibility Information . . . . .                 | E-35-36, E-68-70  |
| Confidentiality/Memorandum of Understanding . . . . .                           | E-37, E-51        |
| Confirmation Review . . . . .                                                   | E-41              |
| Confirmation Review of Benefits Notification and Adverse Action . . . . .       | E-73              |
| Consent Statement . . . . .                                                     | E-38              |
| Current Income . . . . .                                                        | E-25              |
| <br>                                                                            |                   |
| Definitions/Terms . . . . .                                                     | E-6-9             |
| Definitions of Eligibility . . . . .                                            | E-24-25           |
| Denial or Approval of Applications . . . . .                                    | E-19, E-63        |
| Determining Reportable Household Income . . . . .                               | E-25              |
| Different Types of Eligibility . . . . .                                        | E-17-18           |
| Direct Certification (SNAP/TANF) . . . . .                                      | E-6, E-31         |
| Direct Certification (FDPIR) . . . . .                                          | E-33              |
| Direct Certification (Foster) . . . . .                                         | E-33-34           |
| Direct Certification (Medicaid) . . . . .                                       | E-7, E-31, E-34   |

## ELIGIBILITY SECTION INDEX continued

|                                                                                          |                  |
|------------------------------------------------------------------------------------------|------------------|
| Direct Certification Frequency . . . . .                                                 | E-34             |
| Direct Certification—Letter to the SNAP, TANF, or FDPIR Office From the School . . . . . | E-76             |
| Direct Certification Notice . . . . .                                                    | E-66             |
| Direct Verification . . . . .                                                            | E-7, E-38, E-43  |
| Direct Verification—Letter to the SNAP, TANF, or FDPIR Office From the School . . . . .  | E-76             |
| Disaster Response . . . . .                                                              | E-16             |
| Disclosure Chart for Eligibility Information. . . . .                                    | E-67             |
| Disclosure of Free and Reduced-Price Information Agreement . . . . .                     | E-35, E-68-70    |
| Duration of Eligibility . . . . .                                                        | E-20-21          |
| <br>                                                                                     |                  |
| Earnings From Work . . . . .                                                             | E-26             |
| Economic Unit . . . . .                                                                  | E-25             |
| Electronic Free and Reduced-priced Applications. . . . .                                 | E-23             |
| Electronic Signature . . . . .                                                           | E-12, E-23       |
| Eligibility Criteria . . . . .                                                           | E-16-17          |
| Eligibility Definitions. . . . .                                                         | E-24-28          |
| Eligibility Differences Within Household . . . . .                                       | E-17             |
| Eligibility Scale. . . . .                                                               | E-62             |
| Eligibility Terms . . . . .                                                              | E-6-8            |
| Eligibility Questions & Answers . . . . .                                                | E-48-52          |
| Emancipated Child . . . . .                                                              | E-24             |
| Error-Prone . . . . .                                                                    | E-39-40          |
| Establishing Eligibility . . . . .                                                       | E-49-50          |
| Even Start/Head Start . . . . .                                                          | E-7-8, E-28-29   |
| Even Start/Head Start Federally Funded Enrollment Form. . . . .                          | E-65             |
| Exceptions to Verification . . . . .                                                     | E-39             |
| Extension of Categorical Eligibility. . . . .                                            | E-7              |
| <br>                                                                                     |                  |
| Failed to Apply (Households). . . . .                                                    | E-20             |
| Family Members Living Apart . . . . .                                                    | E-24             |
| Family Size and Income Application (FSIA) . . . . .                                      | E-59-60          |
| FDPIR - Direct Certification . . . . .                                                   | E-33             |
| FDPIR - Letter Sent to the Tribe for Direct Certification/Verification . . . . .         | E-77             |
| FERPA. . . . .                                                                           | E-36             |
| Financial Aid (Students). . . . .                                                        | E-28             |
| Flood Insurance. . . . .                                                                 | E-28             |
| Foreign Exchange Student . . . . .                                                       | E-24             |
| Foreign Language Applications . . . . .                                                  | E-13-14          |
| Foster Child . . . . .                                                                   | E-7, E-12, E-24  |
| Foster Child - Direct Certification. . . . .                                             | E-33-34          |
| Foster Child - Letter Sent to DHS for Direct Certification/Verification . . . . .        | E-77             |
| Free/Reduced-Price Applications . . . . .                                                | E-11-12, E-53-60 |
| <br>                                                                                     |                  |
| Garnisheed Wages . . . . .                                                               | E-26             |
| General Requirements . . . . .                                                           | E-4              |
| Gross Income . . . . .                                                                   | E-25             |
| <br>                                                                                     |                  |
| Head Start/Even Start . . . . .                                                          | E-7, E-28-30     |
| Head Start Federally Funded Enrollment form . . . . .                                    | E-65             |

## ELIGIBILITY SECTION INDEX continued

|                                                     |                    |
|-----------------------------------------------------|--------------------|
| Hearing Procedures (Verification)                   | E-45-46            |
| Homeless Definition                                 | E-24-25            |
| Homeless, Migrant, Runaway Children                 | E-19-20            |
| Household Application                               | E-11, E-53-60      |
| Household Size                                      | E-24               |
| Household Unit                                      | E-25               |
| Households That Fail to Apply                       | E-20               |
| Households That Reapply for Program Benefits        | E-44               |
| Households That Did Not Comply with Verification    | E-44               |
| <br>                                                |                    |
| Income                                              | E-25-28            |
| Income Application                                  | E-59-60            |
| Income Computation                                  | E-18-19            |
| Income-Eligibility Guidelines                       | E-8, E-62          |
| Income Exclusions                                   | E-28               |
| Income for Self Employed                            | E-26               |
| Increase in Benefits                                | E-44               |
| Institutionalized Child                             | E-25               |
| <br>                                                |                    |
| Joint Custody                                       | E-25               |
| <br>                                                |                    |
| Letter of Verification Results/Adverse Action       | E-78               |
| Letter to Household                                 | E-53-58            |
| Loans                                               | E-28               |
| Lump Sum Payments                                   | E-26, E-28         |
| <br>                                                |                    |
| Medicaid (Direct Certification)                     | E-34               |
| Migrant Children                                    | E-8, E-13, E-19-20 |
| Military Benefits                                   | E-25-27            |
| Military Combat Pay                                 | E-27               |
| Military Family Member                              | E-25               |
| Mixed Eligibility                                   | E-17-18            |
| Mixed Households                                    | E-8                |
| <br>                                                |                    |
| Nonresponse Rate                                    | E-41, E-71         |
| Notice of Direct Certification Letter               | E-66               |
| Notice to Households of Approval/Denial of Benefits | E-20-21, E-63      |
| Notification of Selection for Verification          | E-42, E-74-75      |
| <br>                                                |                    |
| Operating Days                                      | E-8                |
| Other Income                                        | E-27-28, E-56-57   |
| Other Source Categorically Eligible                 | E-8, E-11-13       |
| Overt Identification                                | E-8-9              |
| <br>                                                |                    |
| Parental Notification for Disclosure                | E-36-38            |
| Pensions                                            | E-28               |
| Policy Statement                                    | E-4-5              |
| Preprimary                                          | E-30               |
| Processing Applications                             | E-16               |
| Public (Media) Release                              | E-5-6              |

## ELIGIBILITY SECTION INDEX continued

|                                                                                    |                     |
|------------------------------------------------------------------------------------|---------------------|
| Questions & Answers (Applications) . . . . .                                       | E-53-54             |
| Questions & Answers (Eligibility) . . . . .                                        | E-48-52             |
| Random Sample (Verification) . . . . .                                             | E-39                |
| Record Keeping of Applications . . . . .                                           | E-21-22             |
| Reduced-Price Meal . . . . .                                                       | E-10                |
| Reduction in Benefits . . . . .                                                    | E-44                |
| Reportable Income . . . . .                                                        | E-25-28             |
| Residential Child Care Institutions (RCCI) . . . . .                               | E-10                |
| Restrictions for Processing Applications . . . . .                                 | E-22                |
| Rosters . . . . .                                                                  | E-23-24, E-64-65    |
| Retirement Income . . . . .                                                        | E-28                |
| Runaway Children . . . . .                                                         | E-8, E-13, E-19-20  |
| Sample Size (Verification) . . . . .                                               | E-39-40             |
| Sample Pool (Verification) . . . . .                                               | E-39                |
| School Year . . . . .                                                              | E-10                |
| Seasonal/Temporary Workers . . . . .                                               | E-28                |
| Self-Employed Income . . . . .                                                     | E-26                |
| Sharing Information with Other Programs . . . . .                                  | E-35-38, E-61, E-67 |
| SNAP, TANF, FDPIR, or Other Source Categorical Direct Certification Form . . . . . | E-76-77             |
| SNAP, TANF, FDPIR, or Other Source Categorical Direct Verification Form . . . . .  | E-76-77             |
| Standard Sample Size . . . . .                                                     | E-40                |
| Student Transfers in Provision Schools . . . . .                                   | E-15                |
| Substitutions of Applications (Verification) . . . . .                             | E-41                |
| Tax Credit . . . . .                                                               | E-28                |
| Temporary/Seasonal Income . . . . .                                                | E-28                |
| Termination of Benefits . . . . .                                                  | E-44                |
| Terms/Definitions . . . . .                                                        | E-6-10              |
| Time Frame for Application Processing . . . . .                                    | E-16                |
| Time Line (Verification) . . . . .                                                 | E-39-40, E-47       |
| Transfer Students . . . . .                                                        | E-15                |
| Verification Adverse Action . . . . .                                              | E-45, E-78          |
| Verification Appeal . . . . .                                                      | E-45                |
| Verification Application Substitution . . . . .                                    | E-41                |
| Verification Completion . . . . .                                                  | E-44-45             |
| Verification Definitions . . . . .                                                 | E-38-39             |
| Verification Documentation . . . . .                                               | E-42-43             |
| Verification Exceptions . . . . .                                                  | E-39                |
| Verification For Cause . . . . .                                                   | E-46                |
| Verification Eligibility . . . . .                                                 | E-38-39             |
| Verification Nonresponse . . . . .                                                 | E-41                |
| Verification Notification . . . . .                                                | E-42                |
| Verification Record Keeping . . . . .                                              | E-46-47             |
| Verification Report Example . . . . .                                              | E-79-82             |
| Verification Requirements . . . . .                                                | E-39                |
| Verification Response Worksheet . . . . .                                          | E-71                |
| Verification Response Worksheet—Oklahoma City/Tulsa Public Schools Only . . . . .  | E-72                |

**ELIGIBILITY DOCUMENTATION SECTION INDEX continued**

Verification Results .....E-43-44  
Verification Sample Size .....E-40-41  
Verification Summary Report Example .....E-79-82  
Verification Time Line ..... E-38-39, E-47  
Verification—Q & A ..... E-52

WAVE .....E-31-33  
Welfare ..... E-28  
Work Day..... E-10  
Written Evidence .....E-42-43

Zero Income Application ..... E-18

# Notes