STEP 1		List	ALI	L inf	ant	s, c	hild	lren	, an	d st	ud	ents	ир	to a	nd	inclu	din	g gr	ade	12	who	are	э Но	ous	eho	ld N	Mer	nbe	ers		f mor	e sp	aces are	requi	red fo	r addit	ional	name	es, atta	ich ar	other	sheet	of pap	er.
Definition	of F	lous	ehol	d Me	mbe	er: "A	nyo	ne w	no is	livin	g wi	th yo	ı and	d shar	res i	ncom	e and	l exp	ense	es, e\	en if	not r	relat	ted."																				
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STEP 2	2	Do a	any l	Hou	seh	old	Mer	nbe	rs (i	inclu	ıdiı	ng yo	ou) (curre	entl	y pai	ticip	ate	in a	ny o	of th	e fo	llov	wing	j as	sist	anc	е р	rog	ram	s: S	NA	P, TAN	F, o	r FD	PIR?) Yes	. (O No	
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If you ans If you ans								nber	here	e, the	n g	o to S	TEF	4 (D	o no	ot con	<mark>nplet</mark>	e ST	EP 3	<mark>3)</mark>				C	Case	e Nu	ımk	er:																
STEP 3	3	Rep	ort l	nco	me	for	ALI	_ Ho	use	ehol	d N	lemi	ers	(Ski	p th	is ste	p if y	ou a	answ	/ere	d 'Ye	s' to	ST	ΈP	2)				S	ee "S	ource	es of	Income"	on ba	ack pa	ige for	more	e info	rmatio	า.				
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	O I have attached documentation to verify the income information (see page 2). O I am aware that if I purposely give false information, my children may lose meal benefits.																																											
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Printed Name of Adult completing this application									Signature of Adult completing this application									Application Date.																										

INSTRUCTIONS

2024-2025 School Year Eligibility Criteria

Household Size		um Household ible for Free M		Maximum Household Income Eligible for Reduced Price Meals						
	Annually	Monthly	Weekly	Annually	Monthly	Weekly				
1	\$19,578	\$1,632	\$377	\$27,861	\$2,322	\$536				
2	\$26,572	\$2,215	\$511	\$37,814	\$3,152	\$728				
3	\$33,566	\$2,798	\$646	\$47,767	\$3,981	\$919				
4	\$40,560	\$3,380	\$780	\$57,720	\$4,810	\$1,110				
5	\$47,554	\$3,963	\$915	\$67,673	\$5,640	\$1,302				
6	\$54,548	\$4,546	\$1,049	\$77,626	\$6,469	\$1,493				
7	\$61,542	\$5,129	\$1,184	\$87,579	\$7,299	\$1,685				

See the school office for 7 or 8 in the household.

INSTRUCTIONS

Income Verification Info

NOTE: YOU MUST ATTACH PROOF OF ASSISTANCE OR INCOME WITH THE APPLICATION.

TANF or SNAP. Provide a copy of card or letter with beginning and ending dates of the program certification period.

If you reported sources of income on page 1, provide a copy of (choose all that apply):

- Two paycheck stubs or pay envelopes (within two months of the application) that show how often it is disbursed.
- Letter from employer stating gross wages earned and how often they are disbursed.
- Social Security retirement benefit letter.
- Statement of benefits received.
- Pension award notice.
- Notice of eligibility from State Employment Security Office for unemployment compensation.
- Letter from Workers' Compensation.
- Court decree, agreement or copies of checks received for alimony or child support.
- If you have other forms of income (such as rental income), attach information which shows the amount of income received, how often it is received, and the date received.

INSTRUCTIONS

Source of Income

Sources of Income for Children											
Sources of Child Income	Example(s)										
Gross earnings from work	A child has a regular full or part-time job where they earn a salary or wages										
Social Security Disability payments Survivor's benefits	A child is blind or disabled and receives Social Security benefits A parent is disabled, retired, or deceased, and their child receives Social Security benefits										
Income from person outside the household	A friend or extended family member regularly gives a child spending money										
Income from any other source	A child receives regular 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										
Gross salary, wages, cash bonuses Net income from self-employment (farm or business); FARM—refer to line 18 of the 1040 or line 34 from Schedule F; BUSINESS—refer to line 12 of 1040 or line 31 from Schedule C. If you are in the U.S. Military: Basic pay and cash bonuses (do NOT include combat pay, FSSA, or privatized housing allowances) Allowances for off-base housing, food and clothing	Unemployment benefits Worker's compensation Supplemental Security Income (SSI) Cash assistance from State or local government Alimony payments Child support payments Veteran's benefits Strike benefits	Social Security (including railroad retirement and black lung benefits) Private pensions or disability benefits Regular income from trusts or estates Annuities Investment income Earned interest Rental income Regular cash payments from outside household										

DO NOT FILL OUT	Only			Annual Income (Conversion: Weekly x 5	24, Monthly x 12							
	າ?		Household	Categorical		Eligibility	,						
Total Income	. [Weekly	Bi-Weekly	2x Month	Monthly	Yearly	Size	Eligibility	Free	Reduced	Denied	Date Denied	Reason for Denial or Withdrawal
		0	0	0	0	0		0	0	0	0		
Determining Official's Signa	ature	e			Date								