

## 2013-2014 LETTER TO HOUSEHOLDS

Dear Parent/Guardian:

Children need healthy meals to learn. **Galax Middle School** offers healthy meals every school day. Student breakfast costs **\$1.20** and lunch costs **\$1.60**. Your children may qualify for free meals or for reduced price meals. Reduced price breakfast costs **\$0.30** and lunch costs **\$0.40**. All meals served must meet standards established by the U.S. Department of Agriculture. However, if a student has been determined by a doctor to be disabled and the disability prevents the student from eating the regular school meal, the school will make substitutions prescribed by the doctor. If a substitution is prescribed, there will be no extra charge for the meal. If your student needs substitutions because of a disability, please contact the school nurse at **Galax Middle School** for further information.

Children who are members of households receiving Supplemental Nutrition Assistance Program (SNAP) benefits (formerly the Food Stamp Program) or Temporary Assistance for Needy Families (TANF) are eligible for free meals regardless of income. Foster children who are the legal responsibility of a welfare agency or court are eligible for free meals regardless of the income of the household with whom they reside. Children who are members of households participating in WIC may also be eligible for free or reduced-price meals based on the household's income. If your total household income is at or below the Federal Income Eligibility Guidelines, shown on the chart below, your child(ren) may get free meals **or** reduced price meals. Your child(ren)'s application from last school year is only good for the first few days of this school year. **YOU MUST SEND IN A NEW HOUSEHOLD APPLICATION FOR EACH SCHOOL YEAR.**

### HOW TO APPLY

Households that are receiving SNAP or TANF for their children as of July 1 may not have to fill out an application. School officials will notify you in writing of your child(ren)'s eligibility for free meal benefits. Once notified your child(ren) will receive free meals unless you tell the school that you do not want benefits. **If you are not notified by 8/15/2013, you must submit an application.** The application must contain the names of all students in the household, the SNAP or TANF case number, and the signature of an adult household member.

**If you do not receive SNAP or TANF benefits for your child(ren) complete the application and return it to the school division. If you do not list a SNAP or TANF case number for the child(ren) you are applying for, then the application must have the names of all students, the names of all other household members, the amount of income each person received last month, and how often the income was received. An adult household member must sign the application and include the last four digits of the social security number. If the person does not have a social security number, check the box provided indicating none. You or your child(ren) do not have to be U.S. citizens to qualify for free or reduced price meals.**

**If you are applying for a foster child, who is the legal responsibility of a welfare agency or court, an**

application is not required. Contact (*approving official*) at (*phone number*) for more information. If you are applying for a homeless, migrant, or runaway child, an application may not be necessary. Contact (*homeless liaison*) at (*phone number*) for more information.

INCOME CHART			
For Free or Reduced Price Meals			
Effective July 1, 2013 to June 30, 2014			
Household Size	Annual	Monthly	Weekly
1	21,257	1,772	409
2	28,694	2,392	552
3	36,131	3,011	695
4	43,568	3,631	838
5	51,005	4,251	981
6	58,442	4,871	1,124
7	65,879	5,490	1,267
8	73,316	6,110	1,410
For Each Additional Family Member Add	\$7,437	\$620	\$144

**An application that is not complete cannot be approved. An application that is not signed is not complete. You must send in a new application each school year.**

**FEDERAL INCOME GUIDELINES:** Your child(ren) may be eligible for free meals or reduced price meals if your household income is within the limits on the Federal Income Eligibility Guidelines chart shown above.

**OTHER BENEFITS:** Your child(ren) may be eligible for other benefits such as the Virginia children's health insurance program called Family Access to Medical Insurance Security (FAMIS) and/or Medicaid. The law allows the school division to share your free or reduced price meal eligibility information with Medicaid and FAMIS. These programs can only use the information to identify children who may be eligible for free or low-cost health insurance, and to enroll them in either Medicaid or FAMIS. These agencies are not allowed to use the information from your free or reduced price meal application for any other purpose. Medicaid officials or officials with FAMIS may contact you to get more information. You are not required to allow us to share this information with Medicaid or the FAMIS program. Your decision will not affect your children's eligibility for free and reduced price meals. If you do not want your information shared, please check the appropriate box in Section 6 of the application. You may qualify for other assistance programs. To find out how to apply for SNAP or other assistance programs, contact the local social service office in your area.

**CONFIDENTIALITY AND NOTICE OF DISCLOSURE:** School officials use the information on the application to determine if your child is eligible to receive free or reduced price meals and to verify eligibility. As authorized by the National School Lunch Act, the school division may inform officials connected with other child nutrition, health, and education programs of the information on your application to determine benefits for those programs or for funding and/or evaluation purposes.

**VERIFICATION:** School officials may check your eligibility at any time during the school year. School officials may ask you to send information to prove that your child(ren) should receive free or reduced price meals.

**FAIR HEARING:** If you do not agree with the decision on your application or the results of verification, you may wish to discuss it with officials in the school nutrition office at the telephone number below. If you wish to review the final decision on your application you also have the right to a fair hearing. You can request a hearing by calling or writing the following official:

Hearing Official Name: Jeff Sharpe, Director Support Services Phone: 276-236-2350

Address: Galax City Public Schools, 223 Long Street, Galax, VA 24333

**REAPPLICATION:** You may reapply for free and reduced price meals any time during the school year. If you are not eligible now but have a change, such as a decrease in household income, an increase in household size, become unemployed or get SNAP or TANF for your child(ren), fill out an application at that time.

**IF YOU NEED HELP FILLING OUT THE APPLICATION FORM, PLEASE CONTACT THE SCHOOL YOUR CHILD(REN) ATTENDS OR THE CENTRAL SCHOOL NUTRITION OFFICE. Return the complete, signed application to: (Name, address, phone number).**

You will be notified when your child(ren)'s application is approved or denied. If you have questions or need help, call:

Name: Kristie Legg, Principal Telephone #: 276-236-6124

Sincerely,

Signature *Kristie Legg, Principal* Telephone #: 276-236-6124

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