




Free & Reduced Price Meal Applications

School Year 2024-2025







Objectives


- ▶ Purpose of applications
- ▶ The Free and Reduced Price Meal Application
- ▶ Application Materials
- ▶ Reviewing & processing applications
- ▶ Carryover period
- ▶ Master List
- ▶ Second / Independent Review of Applications

Purpose of Applications

- ▶ Documentation is required for student to receive free or reduced benefits
 - ▶ Direct Certification
 - ▶ Categorical Eligibility / Other Source Categorical Eligibility (participates in assistance program, homeless, runaway, migrant, foster)
 - ▶ Meal Applications
- ▶ Without documentation, student must pay for meals









Certification & Benefit Issuance – A Critical Area (PS 1)

- ▶ USDA research finds more than 1 in 5 applicants are certified incorrectly
 - ▶ Leads to mistaken denial of benefits
- ▶ Errors in the Certification and Benefit Issuance process are considered a Performance Standard 1 violation



Potential for Fiscal Action! \$






Direct Certification (DC)


- ▶ As soon as **July 1, 2024**, check the DC list in HCNP Systems and complete matches
- ▶ Print and mail DC letters to households



Free and Reduced Price Application - Prototype


- ▶ No changes to the prototype application for SY 2024-2025
- ▶ ALWAYS use the current application
 - ▶ DO NOT use applications from previous school year(s)
- ▶ Recommend using HCNP's prototype application
- ▶ The SY 24-25 version is available on HCNP's website
 - ▶ <http://hcnp.hawaii.gov/overview/nslp/> ,
Program Resources → Free and Reduced Price Application



Hawaii Child Nutrition Programs

Free and Reduced Price Application Web-Based Prototype

- ▶ USDA Web-Based Prototype Application for Free & Reduced Price School Meals
 - ▶ <https://www.fns.usda.gov/cn/web-based-prototype-application>
- ▶ Inform households:
 - ▶ How to access the electronic application system
 - ▶ Still have the option to submit a paper application
 - ▶ How to obtain and submit a paper application
- ▶ SFA's responsibility to maintain program integrity



Hawaii Child Nutrition Programs

Application Materials

- ▶ **Send to all households at or near the beginning of the school year:**
 - ▶ Free and Reduced Price Meal Application, SY 2024-2025
 - ▶ 'How to Apply for Free and Reduced Price School Meals'
 - ▶ 'Frequently Asked Questions About Free and Reduced Price School Meals'
- ▶ These are posted on HCNP website
 - ▶ <http://hcnp.hawaii.gov/overview/nsfp/>,
Program Resources → Free and Reduced Price Application



Hawaii Child Nutrition Programs


Application Materials

Other forms available on HCNP's website:


<https://hcnp.hawaii.gov/overview/nsfp/> →
Program Resources → Free and Reduced Price Application


- ▶ Notice to Households of Approval/Denial of Benefits
- ▶ Sharing Information with Other Programs
- ▶ Sharing Information with Medicaid/CHIP





 **STEP 3: Sending to Households**

- ▶ Send application packet near beginning of the school year to allow time for processing
 - ▶ School year begins July 1st
- ▶ Best practices for making materials available:
 - ▶ Send home with each student on first day of school
 - ▶ Mail to household (email as an alternative)
 - ▶ Put in registration/enrollment packet
 - ▶ Post on school website, if applicable
- ▶ Translated Applications:
<https://www.fns.usda.gov/school-meals/translated-applications>




 **Remember, you CANNOT require any child or household to submit an application. However, they must be aware that they have the right to do so at any time during the school year.**



 **A Word on Confidentiality**


- ▶ Always use caution when handling applications – they contain sensitive and confidential information
 - ▶ Name, address, household size, income, ethnicity/race, SNAP/TANF case number, etc.
- ▶ A student's eligibility must never be publicized or accessible to unauthorized individuals



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STEP 4: Processing Applications

- ▶ Date stamp applications when they are returned to school
- ▶ Application must be processed **within 10 operating days** of receipt
- ▶ Check applications for completeness
- ▶ Remember: the sooner you process and certify an application, the sooner that student receives the benefit they are entitled to




Hawaii Child Nutrition Programs

SNAP / TANF Case Number


When a household submits an application indicating an Assistance Program:

- ▶ Verify that case number matches the format used by the applicable program
- ▶ The child must be given free meals
- ▶ The determining official should compare the case number to the DC list
 - ▶ If there's a match:
 - ▶ Retain the application on file, but do not process it
 - ▶ Place household on the DC list
 - ▶ Eligibility is extended to all children in the household
 - ▶ If no match:
 - ▶ Contact the household for clarification, or
 - ▶ Verify for cause





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Incomplete Applications




- ▶ Number of household members does not equal number of names on application
- ▶ Frequency of income is missing
- ▶ Missing SNAP/TANF number (when #2 was answered 'yes')
- ▶ SNAP/TANF number is questionable
- ▶ No adult signature
- ▶ No social security number, "no Social Security Number" box is not checked

Incomplete Applications


The SFA **“should make reasonable efforts to contact the household in order to clarify or obtain the required information”**

- ▶ Contact household to obtain missing information
- ▶ Document the communication
 - ▶ Initial/date, who was contacted in the household, and the outcome
 - ▶ Do not use white out!
- ▶ For missing signature: request parent come to school to sign the application
- ▶ If unable to contact the household, send “Notice of Approval/Denial of Benefits”
 - ▶ Denied for incomplete application




Indication of ‘No Income’

- ▶ Application instructions explain how a household should report income
 - ▶ If a household member(s) does not have income, they should mark ‘zero’ in income field
 - ▶ Leaving income field blank is indicative of ‘no income’
- ▶ An application with a blank income field is considered complete and can be processed
 - ▶ Suspicious applications – Verify for Cause (October)



Income Eligibility Guidelines

- ▶ Not available to general public
- ▶ Ensure the SY 2024-25 guidelines are being used
- ▶ Income conversion factors are on bottom back of HCNP prototype application
- ▶ If application indicates multiple income frequencies:
 - ▶ Convert to annual income then make determination




Hawaii Child Nutrition Programs

INCOME ELIGIBILITY GUIDELINES FOR FREE AND REDUCED-PRICE MEALS


Use for all Child Nutrition Programs to determine eligibility for Free and Reduced-Price Meals or MRE.

EFFECTIVE DATE: JULY 1, 2024 TO JUNE 30, 2025


FREE MEALS					REDUCED-PRICE MEALS						
Family Size	Monthly	Twice per Month	Every Two Weeks	Weekly	Family Size	Monthly	Twice per Month	Every Two Weeks	Weekly		
1	22,020	1,076	79	86	453	1	22,020	2,065	1,252	176	
2	30,556	2,546	1,273	1,171	988	2	45,679	3,623	2,192	339	
3	36,107	3,712	1,869	1,685	1,143	3	54,637	4,258	2,289	3,112	3,692
4	40,544	3,937	1,964	1,794	1,187	4	65,370	5,123	2,796	2,153	3,272
5	54,091	4,930	2,270	2,104	1,502	5	77,630	6,466	3,242	2,894	3,492
6	62,738	5,220	2,615	2,413	1,207	6	89,281	7,441	3,721	3,434	3,712
7	70,790	5,690	2,990	2,723	1,362	7	100,733	8,765	4,198	3,920	3,938
8	78,832	6,330	3,295	3,032	1,516	8	112,184	9,745	4,675	4,315	2,158
9	86,874	7,241	3,621	3,342	1,671	9	123,635	10,904	5,153	4,756	2,370
10	94,906	7,912	3,957	3,652	1,826	10	135,086	11,258	5,631	5,197	2,600
11	102,973	8,583	4,293	3,962	1,981	11	146,540	12,234	6,109	5,638	2,821
12	111,030	9,254	4,629	4,272	2,136	12	157,992	13,188	6,587	6,079	3,042
13	119,087	9,925	4,965	4,582	2,291	13	169,444	14,124	7,065	6,520	3,263
14	127,144	10,596	5,301	4,892	2,446	14	180,896	15,078	7,543	6,961	3,484
15	135,201	11,267	5,637	5,202	2,601	15	192,348	16,022	8,021	7,402	3,705
16	143,258	11,938	5,973	5,512	2,756	16	203,800	16,966	8,499	7,843	3,926
17	151,315	12,609	6,309	5,822	2,911	17	215,252	17,910	8,977	8,284	4,147
18	159,372	13,280	6,645	6,132	3,066	18	226,704	18,854	9,455	8,725	4,368
19	167,429	13,951	6,981	6,442	3,221	19	238,156	19,798	9,933	9,166	4,589
20	175,486	14,622	7,317	6,752	3,376	20	249,608	20,742	10,411	9,607	4,810
21	183,543	15,293	7,653	7,062	3,531	21	261,060	21,686	10,889	10,048	5,031
22	191,600	15,964	7,989	7,372	3,686	22	272,512	22,630	11,367	10,489	5,252
23	199,657	16,635	8,325	7,682	3,841	23	283,964	23,574	11,845	10,930	5,473
24	207,714	17,306	8,661	8,002	4,006	24	295,416	24,518	12,323	11,371	5,694
25	215,771	17,977	8,997	8,312	4,161	25	306,868	25,462	12,801	11,812	5,915
26	223,828	18,648	9,333	8,622	4,316	26	318,320	26,406	13,279	12,253	6,136
27	231,885	19,319	9,669	8,932	4,471	27	329,772	27,350	13,757	12,694	6,357
28	239,942	19,990	10,005	9,242	4,626	28	341,224	28,294	14,235	13,135	6,578
29	247,999	20,661	10,341	9,552	4,781	29	352,676	29,238	14,713	13,576	6,799
30	256,056	21,332	10,677	9,862	4,936	30	364,128	30,182	15,191	14,017	7,020
31	264,113	22,003	11,013	10,172	5,091	31	375,580	31,126	15,669	14,458	7,241
32	272,170	22,674	11,349	10,482	5,246	32	387,032	32,070	16,147	14,899	7,462
33	280,227	23,345	11,685	10,792	5,401	33	398,484	33,014	16,625	15,340	7,683
34	288,284	24,016	12,021	11,102	5,556	34	409,936	33,958	17,103	15,781	7,904
35	296,341	24,687	12,357	11,412	5,711	35	421,388	34,902	17,581	16,222	8,125
36	304,398	25,358	12,693	11,722	5,866	36	432,840	35,846	18,059	16,663	8,346
37	312,455	26,029	13,029	12,032	6,021	37	444,292	36,790	18,537	17,104	8,567
38	320,512	26,700	13,365	12,342	6,176	38	455,744	37,734	19,015	17,545	8,788
39	328,569	27,371	13,701	12,652	6,331	39	467,196	38,678	19,493	17,986	9,009
40	336,626	28,042	14,037	12,962	6,486	40	478,648	39,622	19,971	18,427	9,230
41	344,683	28,713	14,373	13,272	6,641	41	490,100	40,566	20,449	18,868	9,451
42	352,740	29,384	14,709	13,582	6,796	42	501,552	41,510	20,927	19,309	9,672
43	360,797	30,055	15,045	13,892	6,951	43	513,004	42,454	21,405	19,750	9,893
44	368,854	30,726	15,381	14,202	7,106	44	524,456	43,398	21,883	20,191	10,114
45	376,911	31,397	15,717	14,512	7,261	45	535,908	44,342	22,361	20,632	10,335
46	384,968	32,068	16,053	14,822	7,416	46	547,360	45,286	22,839	21,073	10,556
47	393,025	32,739	16,389	15,132	7,571	47	558,812	46,230	23,317	21,514	10,777
48	401,082	33,410	16,725	15,442	7,726	48	570,264	47,174	23,795	21,955	11,008
49	409,139	34,081	17,061	15,752	7,881	49	581,716	48,118	24,273	22,396	11,229
50	417,196	34,752	17,397	16,062	8,036	50	593,168	49,062	24,751	22,837	11,450
51	425,253	35,423	17,733	16,372	8,191	51	604,620	49,996	25,229	23,278	11,671
52	433,310	36,094	18,069	16,682	8,346	52	616,072	50,940	25,707	23,719	11,892
53	441,367	36,765	18,405	16,992	8,501	53	627,524	51,884	26,185	24,160	12,113
54	449,424	37,436	18,741	17,302	8,656	54	638,976	52,828	26,663	24,601	12,334
55	457,481	38,107	19,077	17,612	8,811	55	650,428	53,772	27,141	25,042	12,555
56	465,538	38,778	19,413	17,922	8,966	56	661,880	54,716	27,619	25,483	12,776
57	473,595	39,449	19,749	18,232	9,121	57	673,332	55,660	28,097	25,924	13,007
58	481,652	40,120	20,085	18,542	9,276	58	684,784	56,604	28,575	26,365	13,228
59	489,709	40,791	20,421	18,852	9,431	59	696,236	57,548	29,053	26,806	13,449
60	497,766	41,462	20,757	19,162	9,586	60	707,688	58,492	29,531	27,247	13,670
61	505,823	42,133	21,093	19,472	9,741	61	719,140	59,436	30,009	27,688	13,891
62	513,880	42,804	21,429	19,782	9,896	62	730,592	60,380	30,487	28,129	14,112
63	521,937	43,475	21,765	20,092	10,051	63	742,044	61,324	30,965	28,570	14,333
64	530,000	44,146	22,101	20,402	10,206	64	753,496	62,268	31,443	29,011	14,554
65	538,063	44,817	22,437	20,712	10,361	65	764,948	63,212	31,921	29,452	14,775
66	546,126	45,488	22,773	21,022	10,516	66	776,400	64,156	32,399	29,893	15,006
67	554,189	46,159	23,109	21,332	10,671	67	787,852	65,100	32,877	30,334	15,227
68	562,252	46,830	23,445	21,642	10,826	68	799,304	66,044	33,355	30,775	15,448
69	570,315	47,501	23,781	21,952	10,981	69	810,756	66,988	33,833	31,216	15,669
70	578,378	48,172	24,117	22,262	11,136	70	822,208	67,932	34,311	31,657	15,890
71	586,441	48,843	24,453	22,572	11,291	71	833,660	68,876	34,789	32,098	16,111
72	594,504	49,514	24,789	22,882	11,446	72	845,112	69,820	35,267	32,539	16,332
73	602,567	50,185	25,125	23,192	11,601	73	856,564	70,764	35,745	32,980	16,553
74	610,630	50,856	25,461	23,502	11,756	74	868,016	71,708	36,223	33,421	16,774
75	618,693	51,527	25,797	23,812	11,911	75	879,468	72,652	36,701	33,862	17,005
76	626,756	52,198	26,133	24,122	12,066	76	890,920	73,596	37,179	34,303	17,226
77	634,819	52,869	26,469	24,432	12,221	77	902,372	74,540	37,657	34,744	17,447
78	642,882	53,540	26,805	24,742	12,376	78	913,824	75,484	38,135	35,185	17,668
79	650,945	54,211	27,141	25,052	12,531	79	925,276	76,428	38,613	35,626	17,889
80	659,008	54,882	27,477	25,362	12,686	80	936,728	77,372	39,091	36,067	18,110
81	667,071	55,553	27,813	25,672	12,841	81	948,180	78,316	39,569	36,508	18,331
82	675,134	56,224	28,149	25,982	13,006	82	959,632	79,260	40,047	36,949	18,552
83	683,197	56,895	28,485	26,292	13,161	83	971,084	80,204	40,525	37,390	18,773
84	691,260	57,566	28,821	26,602	13,316	84	982,536	81,148	41,003	37,831	19,004
85	699,323	58,237	29,157	26,912	13,471	85	993,988	82,092	41,481	38,272	19,225
86	707,386	58,908	29,493	27,222	13,626	86	1,005,440	83,036	41,959	38,713	19,446
87	715,449	59,579	29,829	27,532	13,781	87	1,016,892	83,980	42,437	39,154	19,667
88	723,512	60,250	30,165	27,842	13,936	88	1,028,344	84,924	42,915	39,595	19,888
89	731,575	60,921	30,501	28,152	14,091	89	1,039,796	85,868	43,393	40,036	20,109
90	739,638	61,592	30,837	28,462	14,246	90	1,051,248	86,812	43,871	40,477	20,330
91	747,701	62,263	31,173	28,772	14,401	91	1,062,700	87,756	44,349	40,918	20,551
92	755,764	62,934	31,509	29,082	14,556	92	1,074,152	88,700	44,827	41,359	20,772
93	763,827	63,605	31,845	29,392	14,711	93	1,085,604	89,644	45,305	41,800	21,003
94	771,890	64,276	32,181	29,702	14,866	94	1,097,056	90,588	45,783	42,241	21,224
95	780,000	6									

Helpful Tips 

- ▶ Keep a separate log with a tally of the answers to the ethnicity/race questions
 - ▶ This will be useful for completing the Ethnic Data Report
- ▶ Identify error prone applications
 - ▶ Add a check mark, use post-its, etc.
 - ▶ MUCH easier when verification rolls around in October

Master List 

- ▶ Each school **MUST** have a system for issuing benefits and updating each student's eligibility status
 - ▶ List must be maintained onsite
- ▶ This is what is referred to as the Master List
 - ▶ Consists of name of each student enrolled (updated continually throughout the year), eligibility status/changes, start and end dates
- ▶ Separate from meal counting system and POS
- ▶ Helpful in completing edit checks



Sample Master List

MASTER LIST FOR NATIONAL SCHOOL LUNCH PROGRAM
Free By Income (Application)

School Year: 2024-2025
School: Akamai Elementary

Free Students by Income (Application)	Start Date	End Date	Comments
Johny Akama	7/7/2024	8/31/2024	changed to DC
Kendall Jones	7/13/2024		

DC | Categorically Eligible | Free by Income | Reduced Price | Paid | Monthly Totals

<http://hcnp.hawaii.gov/overview/nslp/> Program Resources → Free and Reduced Price Application

Hawaii Child Nutrition Programs

Sample Master List


School Year: _____
 School Name: _____

The purposes for keeping this information are:
 1. to have numbers readily available for the monthly edit check on the reimbursement claim,
 2. to compare to the roster/checklist or POS for accuracy in the benefit issuance,
 3. to complete the verification summary, and
 4. this information will be requested during an administrative review.

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
DC												
Categorically Eligible												
Free by Income												
TOTAL FREE	0	0	0	0	0	0	0	0	0	0	0	0
Refused Price												
Paid												


Hawaii Child Nutrition Programs

Independent / Second Review of Applications



- ▶ Criteria
 - ▶ 10% or greater error
 - ▶ HCNP discretion
- ▶ Completed before eligibility determinations made
 - ▶ Still adhere to 10 operating day requirement
- ▶ Requirement to review all applications a second time
 - ▶ Ensures certification accuracy
 - ▶ Upholds program integrity

Hawaii Child Nutrition Programs



Reminders

- ▶ Only ONE application per household is needed
- ▶ You cannot require a household to submit an application
- ▶ If a household qualifies for benefits, but refuses, a statement of refusal (in writing) must be obtained – ensure signed and dated
- ▶ All approvals are good for the entire school year, plus 30 day carryover
 - ▶ Verification – may cause change in status



2024-2025 Free and Reduced Priced School Meals Application for Free and Reduced Price School Meals
 (Printed name, date, address and phone number)
 (Child's School/District Name) **MAUI Elementary School**
 (Child's Home Address) **1141 KAWAIAU DRIVE, HONOLULU, HI 96813**

Earnings from Work:
 \$2500 + \$1600 = \$4100

Frequency:
 Monthly (x12)

\$4100 x 12 months = \$49,200 annually

Child's First Name | **MI** | **CHILD'S LAST NAME** | **GRADE** | **HOUSEHOLD TYPE** | **REGIONS** | **EXEMPTIONS**

Child's First Name	MI	CHILD'S LAST NAME	GRADE	HOUSEHOLD TYPE	REGIONS	EXEMPTIONS
Leah	J	Simpson	4	MR	<input type="checkbox"/>	<input type="checkbox"/>
Lisa	MI	Simpson	6	MR	<input type="checkbox"/>	<input type="checkbox"/>
Maggie		Simpson		MR	<input type="checkbox"/>	<input type="checkbox"/>

HOUSEHOLD MEMBERS

Member Name	Relationship	Age	Grade	Household Type	Regions	Exemptions
Monica Simpson	Spouse	32		MR	<input type="checkbox"/>	<input type="checkbox"/>
Marge Simpson	Spouse	51		MR	<input type="checkbox"/>	<input type="checkbox"/>

Child Income

Signature of Applicant: Marge Simpson, Date: July 16, 2024

Signature of School Official: [Blank], Date: [Blank]

Hawaii Child Nutrition Programs

DO NOT FILL OUT for school use only.

Annual Income Categories: Weekly * 52, Every 2 Weeks * 26, Twice a Month * 24, Monthly * 12. Do not annualize income to determine eligibility unless more than one income frequency is listed.

Total Income: **\$49,200** | Age: Every 2 weeks | Every 2 weeks | Monthly | Year | Household Size: **5** | Date Received: **July 22, 2024**

Directly Certified: Foster Child | Non-Foster Child | Free | Reduced | Denied - Head

Eligibility: Free | Reduced | Denied (and) Reason: [Blank] | Date Withdrawn: [Blank]

Verifying Officer's Signature: **Neel Plandaris**, Date: **7/22/24** | **MURPHY BROWN**, Date: **7/24/24**

2024-2025 Prototype Household Application for Free and Reduced Price School Meals

APPLY ONLINE: www.kent.edu/online
 RETURN TO (School/District Name): **Ohl A. Academy**
 ADDRESS: **1100 Grand Prairie Lane, Hillsdale, MI 49826**

STEP 1 List ALL children, infants, and students up to and including grade 12. Attach another sheet of paper if you need space for more names.

CHILD'S First Name	MI	CHILD'S Last Name	Grade	Student?	Enrolled?	Migrant	Romney	Homeless?
YVES	F	Smith	11	SR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carlton	B	Banks	11	SR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ashley	L	Banks	8	SR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

STEP 2 Do any household members (including you) participate in SNAP or TANF? YES NO

STEP 3 List ALL household members and income for each member (before taxes and deductions).

STEP 4 Contact information and adult signature. RETURNS COMPLETED FORM TO YOUR CHILD'S SCHOOL.

Signature of Adult: **Phillip Banks**
 Date: **10/03/2024**

INCOMPLETE!
 # of household members does not match # of names
 No adult signature

2024-2025 Prototype Household Application for Free and Reduced Price School Meals

APPLY ONLINE: www.kent.edu/online
 RETURN TO (School/District Name): **Ohl A. Academy**
 ADDRESS: **1100 Grand Prairie Lane, Hillsdale, MI 49826**

STEP 1 List ALL children, infants, and students up to and including grade 12. Attach another sheet of paper if you need space for more names.

CHILD'S First Name	MI	CHILD'S Last Name	Grade	Student?	Enrolled?	Migrant	Romney	Homeless?
Kyleen	P	Swanson	11	SR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baby		Swanson (unborn)		SR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

STEP 2 Do any household members (including you) participate in SNAP or TANF? YES NO

STEP 3 List ALL household members and income for each member (before taxes and deductions).

STEP 4 Contact information and adult signature. RETURNS COMPLETED FORM TO YOUR CHILD'S SCHOOL.

Signature of Adult: **Joe Swanson**
 Date: **August 1, 2024**

MORE INFORMATION NEEDED
 Verify if child is on the DC list
 Verify unborn child / # of household members
 Verify income frequency

2024-2025 Prototype Household Application for Free and Reduced Price School Meals

APPLY ONLINE: www.kent.edu/online
 RETURN TO (School/District Name): **Alcona Middle School**
 ADDRESS: **100 Alcona Lakeside Dr, Sisseton, SD 57273**

STEP 1 List ALL children, infants, and students up to and including grade 12. Attach another sheet of paper if you need space for more names.

CHILD'S First Name	MI	CHILD'S Last Name	Grade	Student?	Enrolled?	Migrant	Romney	Homeless?
Joey	P	King	7	SR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mary	B	King	3	SR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lea	K	King	K	SR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

STEP 2 Do any household members (including you) participate in SNAP or TANF? YES NO

STEP 3 List ALL household members and income for each member (before taxes and deductions).

STEP 4 Contact information and adult signature. RETURNS COMPLETED FORM TO YOUR CHILD'S SCHOOL.

Signature of Adult: **Marc A. King**
 Date: **08/29/24**

Earnings from Work = \$1750
 Frequency = Biweekly (x26)
\$1750 x 26 = \$45,500 Annually
FREE, mark as error prone

Family Size	FREE MEALS				
	Yearly	Monthly	Twice per Month	Every Two Weeks	Weekly
1	22,503	1,876	938	866	433
2	30,550	2,546	1,273	1,175	588
3	38,597	3,217	1,609	1,485	743
4	46,644	3,887	1,944	1,794	897




QUESTIONS?




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Kasey Kawamoto kasey.kawamoto@k12.hi.us

(808) 587-3600





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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/AD-3027-2015-Complaint-Form-0928-2005-2015-1128-17.pdf> and mail it, from any USDA office, by calling (866) 632-6992, 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:
complain.intake@usda.gov

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