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 <u>one</u> application per household, <u>even if your children attend more than one school in the **Diocese of Baton Rouge Child Nutrition Program**. The application must be filled out completely to certify your children for free or reduced price school meals. <u>OR</u> you can apply online at: <u>www.cnpbr.org</u> (under the 'Meal Info' tab).</u>

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 the **Diocese of Baton Rouge Child Nutrition Program at 225-387-6421 or cnp@diobr.org**.

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

STEP 1: LIST ALL STUDENTS IN THE HOUSEHOLD UP TO AND INCLUDING GRADE 12

Tell us how many 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 STUDENTS in your household who are:

- Students age 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 the Diocese of Baton Rouge School District, regardless of age.

• Students attending the Diocese of Baton Rouge School District , regardless of age.						
A) List each child's	B) Enter each	C) Enter each	D) Enter the School	E) Is the child a	F) Do you have any	G) Are any children
legal name.	child's Date of	child's current	Code for the	student in the	foster children?	homeless, migrant,
For each child, print	Birth.	grade.	Diocese of Baton	Diocese of Baton	If any children listed	or runaway?
their <i>legal</i> first name,	For each child, print	If the child you	Rouge school that	Rouge School	are foster children,	If you believe any
middle initial and	their DOB	entered is not in	each child attends.	District? Mark 'Yes'	mark the "Foster	child listed in this
legal last name. Use	information under	school, please do not	If the child listed	or 'No' under the	Child" box next to the	section meets this
one line of the	the column titled	enter anything.	<u>does</u> <u>not</u> attend a	column titled "Is	child's name. If you	description, mark the
application for each	'Birthdate' using 2		Diocese of Baton	DIOBR Student" to	are ONLY applying	"Homeless, Migrant,
child. When printing	digits for the month,		Rouge School, please	tell us which children	for foster children,	Runaway" box next
names, write one	date and year		do not enter	attend the Diocese of	after finishing STEP	to the child's name
letter in each box.	(mm/dd/yy).		anything. A list of all	Baton Rouge School	1 , go to STEP 4 .	and <u>complete all</u>
Stop if you run out of			the schools	District. If your child	<u>Foster children who</u>	steps of the
space. If there are			participating in the	does not attend a	live with you may	application.
more children			DIOBR Child	Diocese of Baton	count as members of	
present than lines on			Nutrition Program is	Rouge School, please	your household and	
the application,			found on the back of	check the 'NO' box.	should be listed on	
attach a second piece			the application. If		your application. If	
of paper with all			you have children		you are applying for	
required information			attending schools not		both foster and non-	
for the additional			listed on the back of		foster children, go to	
children.			the application, you		step 3.	
			must contact that			
			school for			
			information and/or			
			instructions on			
			applying for free and			
			reduced meals.			

STEP 2: DO ANY HOUSEHOLD MEMBERS CURRENTLY PARTICIPATE IN SNAP, TANF, OR FDPIR?

If anyone in your household (including you) currently participates in one or more of the assistance programs listed below, your children are eligible for free school meals:

- The Supplemental Nutrition Assistance Program (SNAP) for Louisiana.
- Temporary Assistance for Needy Families (TANF) for Louisiana.
- The Food Distribution Program on Indian Reservations (FDPIR).

A) If no one in your household participates in any of the above listed programs:

• Leave **STEP 2** blank and go to **STEP 3**.

B) If anyone in your household participates in any of the above listed programs:

- Check the box next to the program you participate in and provide 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: LA Dept of Children and Family Services at 888-524-3578. You **must** provide a case number on your application if you checked any box in Section 2.
- Go to **STEP 4**.

STEP 3: LIST AND REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

How do I report my income?

- Use the charts titled "Sources of Income for Children" and "Sources of Income for Adults," 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.
 - o Gross income is the total income received before taxes
 - o 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.

3.A. REPORT INCOME EARNED BY CHILDREN

A) Report all income earned or received by children. Report the <u>combined</u> 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.

3.B REPORT INCOME EARNED BY ADULTS

Who should I list here?

- When filling out this section, please include ALL adult and other members NOT listed in Step 1 in your household who are living with you and share income and expenses, even if they are not related and even if they do not receive income of their own.
- Do NOT include:
 - o People who live with you but are not supported by your household's income AND do not contribute income to your household.
 - o Students already listed in **STEP 1.**

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.

E) Report income from pensions/retirement/all other income. Report all income that applies in the "Pensions/Retirement/ All Other Income" field on the application.

C) Report earnings from work. 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.

What if I am self-employed? Report income from that work as a net amount. This is calculated by subtracting the total operating expenses of your business from its gross receipts or revenue.

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 and reduced price meals.

D) Report income from public assistance/child support/alimony. Report all income that applies in the "Public Assistance/Child Support/Alimony" field on the application. Do not report the cash value of any public assistance benefits NOT listed on the chart. If income is received from child support or alimony, only report court-ordered payments. Informal but regular payments should be reported as "other" income in the next part.

G) Provide the last four digits of your Social Security Number. An adult household member must enter the last four digits of their 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 members have a Social Security Number, leave this space blank and mark the box to the right labeled "Check if no SSN."

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 back of 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, email address, or both is optional, but helps us reach you quickly if we need to contact you and to send you the meal application status letter.

B) Print and sign your name. Print the name of the adult signing the application and that person signs in the box "Signature of adult."

C) Write today's date. In the space provided, write today's date in the box.

D) Share children's racial and ethnic identities (optional). At the bottom of the application, we are required to ask for information about your children's race and ethnicity. This information is important and helps us 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.

Non Discrimination Statement

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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.ocio.usda.gov/document/ad-3027, 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;

email:

program.intake@usda.gov

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