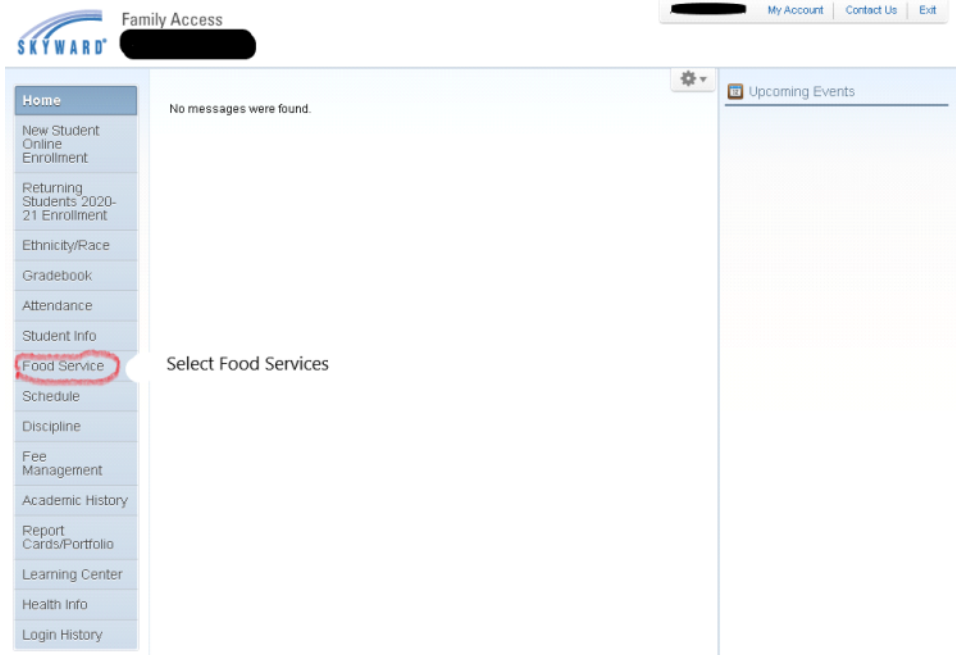
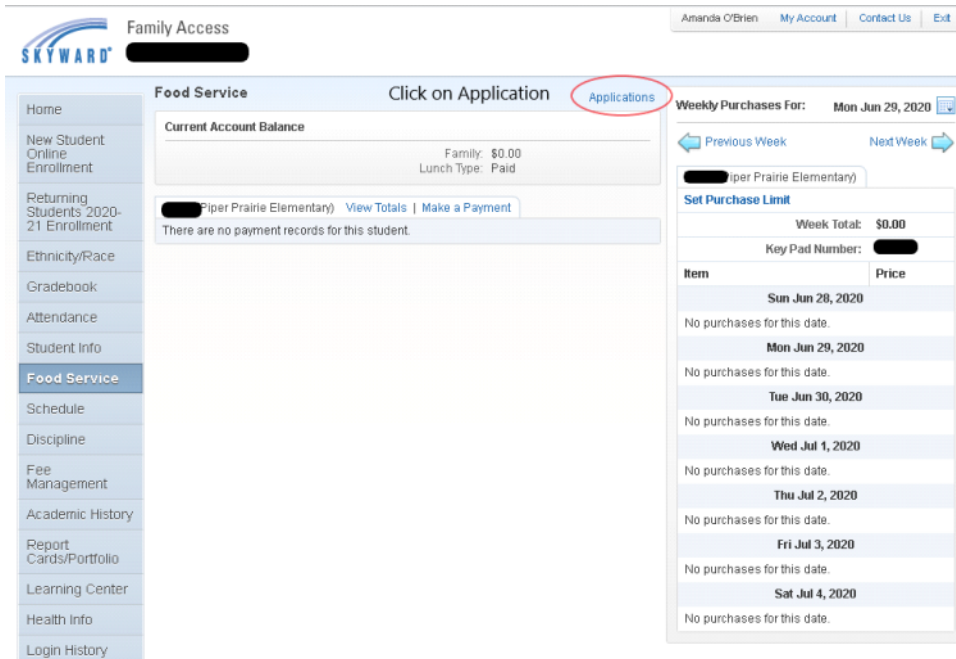


Instructions for Free and Reduced Applications

Monday, June 29, 2020 3:03 PM



The screenshot shows the Skyward Family Access home page. The top navigation bar includes the Skyward logo, the text "Family Access", and a user profile icon with links for "My Account", "Contact Us", and "Exit". A left sidebar menu lists various options: Home, New Student Online Enrollment, Returning Students 2020-21 Enrollment, Ethnicity/Race, Gradebook, Attendance, Student Info, **Food Service** (circled in red), Schedule, Discipline, Fee Management, Academic History, Report Cards/Portfolio, Learning Center, Health Info, and Login History. The main content area displays "No messages were found." and "Select Food Services". On the right, there is a section for "Upcoming Events".



The screenshot shows the Skyward Family Access "Food Service" page. The top navigation bar includes the Skyward logo, the text "Family Access", and a user profile icon for "Amanda O'Brien" with links for "My Account", "Contact Us", and "Exit". The left sidebar menu is identical to the previous screenshot, with "Food Service" highlighted. The main content area is titled "Food Service" and "Click on Application" (with "Applications" circled in red). It displays the "Current Account Balance" for the family as \$0.00, with the lunch type set to "Paid". Below this, it shows the student's name "Piper Prairie Elementary" and a message: "There are no payment records for this student." On the right, there is a "Weekly Purchases For:" section for the week of "Mon Jun 29, 2020". This section includes navigation for "Previous Week" and "Next Week", a "Set Purchase Limit" button, and a table showing the weekly total (\$0.00) and the key pad number. The table lists the days of the week from Sunday to Saturday, all showing "No purchases for this date."

Item	Price
Sun Jun 28, 2020	No purchases for this date.
Mon Jun 29, 2020	No purchases for this date.
Tue Jun 30, 2020	No purchases for this date.
Wed Jul 1, 2020	No purchases for this date.
Thu Jul 2, 2020	No purchases for this date.
Fri Jul 3, 2020	No purchases for this date.
Sat Jul 4, 2020	No purchases for this date.

Application for Free and Reduced Price School Meals

Steps: Application for Free and Reduced Price School Meals Next Step Print Back

Letter to Household
Instructions for Applying
Federal Income Chart
Use of Information Statement

Non-discrimination Statement
Income from Self-Employment

Application

- Step 1: Child Names
- Step 2: Benefits
- Step 3: Gross Income
- Step 4: Signature
- Optional: Social and Ethnic Identities

Review and Submit

Dear Parent/Guardian:
Children need healthy meals to learn. Piper USD 203 offers healthy meals every school day. Breakfast costs \$2.00; lunch costs \$2.00. **Your children may qualify for free meals or for reduced price meals.** Reduced price is \$-30 for breakfast and \$-40 for lunch, an application for free or reduced price meal benefits and a set of detailed instructions is included with the letter or available online at https://www.kn-wat.org/SNP/SNP_Menu/SNP_Admin_Program_Renewal_2016.htm. Contact Chantel Nicolay, 913.721.2688 with questions or to request an application be sent. 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 **Food Assistance (FA)**, the **Food Distribution Program on Indian Reservations (FDPIR)** or **Temporary Assistance for Families (TAF)** are eligible for free meals.
 • Foster children that 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/Even 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. Your children may qualify for free or reduced price meals if your household income falls at or below the limits on this chart.
 Your children may qualify for reduced price or free meals if your household income falls within the limits on this chart.

FEDERAL ELIGIBILITY INCOME CHART
For School Year 2020-21

Household Size	Yearly	Monthly	Weekly
1	23,606	1,968	454
2	31,894	2,658	614
3	40,182	3,349	773
4	48,470	4,040	933
5	56,758	4,730	1,092
6	65,046	5,421	1,251
7	73,334	6,112	1,411
8	81,622	6,802	1,570
Each Additional Person:	8,288	691	160

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 haven't been told your children will get free meals, please call or e-mail Jessica Dain, jdain@piperusd.k12.or.us.

Application for Free and Reduced Price School Meals

Steps: Application for Free and Reduced Price School Meals Previous Next Step Print Back

Letter to Household
Instructions for Applying
Federal Income Chart
Use of Information Statement
Non-discrimination Statement
Income from Self-Employment

Application

- Step 1: Child Names
- Step 2: Benefits
- Step 3: Gross Income
- Step 4: Signature
- Optional: Social and Ethnic Identities

Review and Submit

Instructions for Applying. Please select the option below after reviewing all information. **Instructions can be directed to contact information supplied in the Letter to Parents.**

I've read the Instructions for Applying and would like to continue the application.

Select the checkbox on the left to acknowledge the instructions and then select the Next Step button above

• For translated materials, go to www.kn-wat.org, School Nutrition Programs, Administration, Foreign Language Translation.
 • 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 Piper USD 203. 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 Chantel Nicolay, 3130 N. 222nd St., Kansas City, KS 66109, 913.721.2688, cnicolay@piperusd.k12.or.us.
 • By clicking 'Next Step' on the electronic version, the applicant agrees to conduct this transaction by electronic means in accordance with the Kansas Uniform Electronic Transaction Act K.S.A. 16-1601 et. seq.

PLEASE USE A PEN (NOT A PENCIL) WHEN FILLING OUT THE PAPER 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 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 Piper USD 203, 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. Stop if you run out of space. 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 Piper USD 203? Mark "Yes" or "No" under the column titled "Student" to tell us which children attend Piper USD 203.
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. **Foster children who live with you may count as members of your household and should be listed on your application.** If you are only applying for foster children, after completing STEP 1, skip to STEP 4 of the application and these instructions.
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: FA, TAF, OR FDPIR?

If anyone in your household participates in the assistance programs listed below, your children are eligible for free school meals:
 • Food Assistance (FA)
 • Temporary Assistance for Families (TAF) or

Application for Free and Reduced Price School Meals

Steps: Application for Free and Reduced Price School Meals Previous Next Step Print Back

Letter to Household
Instructions for Applying
Federal Income Chart
Use of Information Statement
Non-discrimination Statement
Income from Self-Employment

Application

- Step 1: Child Names
- Step 2: Benefits
- Step 3: Gross Income
- Step 4: Signature
- Optional: Social and Ethnic Identities

Review and Submit

Your children may qualify for reduced price or free meals if your household income falls within the limits on this chart. If you do not qualify for benefits or do not wish to complete an application, check the option below.

I do not qualify for benefits or do not wish to complete an application.

Select on the box above left if you do not qualify after seeing this chart, if you do qualify, select the Next Step button above to continue the application.

FEDERAL ELIGIBILITY INCOME CHART
For School Year 2020-21

Household Size	Yearly	Monthly	Weekly
1	23,606	1,968	454
2	31,894	2,658	614
3	40,182	3,349	773
4	48,470	4,040	933
5	56,758	4,730	1,092
6	65,046	5,421	1,251
7	73,334	6,112	1,411
8	81,622	6,802	1,570
Each Additional Person:	8,288	691	160

Application for Free and Reduced Price School Meals

Steps: Application for Free and Reduced Price School Meals Previous Next Step Print Back

Letter to Household
Instructions for Applying
Federal Income Chart
Use of Information Statement
Non-discrimination Statement
Income from Self-Employment

Application

- Step 1: Child Names
- Step 2: Benefits
- Step 3: Gross Income
- Step 4: Signature
- Optional: Social and Ethnic Identities

Review and Submit

Use of Information Statement: This explains how we will use the information you give us.

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 Food Assistance (FA) Temporary Assistance for Families (TAF) 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 digitally 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.

Application for Free and Reduced Price School Meals

Steps: Application for Free and Reduced Price School Meals [Previous] **Next Step** [Print] [Back]

Letter to Household
Instructions for Applying
Federal Income Chart
Use of Information Statement
Non-discrimination Statement
Income from Self-Employment

Application

- Step 1: Child Names
- Step 2: Benefits
- Step 3: Gross Income
- Step 4: Signature
- Optional: Racial and Ethnic Identities

Review and Submit

Non-discrimination Statement: This explains what to do if you believe you have been treated unfairly.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

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

(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

Application for Free and Reduced Price School Meals

Steps: Application for Free and Reduced Price School Meals [Previous] **Next Step** [Print] [Back]

Letter to Household
Instructions for Applying
Federal Income Chart
Use of Information Statement
Non-discrimination Statement
Income from Self-Employment

Application

- Step 1: Child Names
- Step 2: Benefits
- Step 3: Gross Income
- Step 4: Signature
- Optional: Racial and Ethnic Identities

Review and Submit

Self-employed persons may use income tax records for the preceding calendar year as a base to project the current year's net income, unless the current monthly income provides a more accurate measure. Report income derived from the business venture less operating costs incurred in the generation of that income. Deductions for personal expenses such as interest on home payments, medical expenses, and other similar non-business deductions are not allowed in reducing gross business income. Additional income from other kinds of employment must be treated as separate and apart from the income generated or lost from your business venture. For example, if you operated a business at a net loss, but held additional employment for which a salary was received, the income for purposes of applying for reduced price or free meals would be the income from the salary only. The loss from the business cannot be deducted from a positive income earned in other employment. For purposes of this application, it is not possible to report a negative income from any business venture. The least income possible is zero (no income). The necessary information for entering allowable income from private business operation may be taken from your most recent U.S. Individual Income Tax Return - Form 1040. Add together the amounts reported on the following lines:

LINE 12	25000.00	Business Income or (Loss)
LINE 13	30.00	Capital Gain or (Loss)
LINE 14	0.00	Other Gains or (Losses)
LINE 17	0.00	Rental Real Estate, Royalties, Partnerships, S Corporations, Trusts, Etc.
LINE 18	0.00	Farm Income or (Loss)
TOTAL	25000.00	Gross Annual Income Before Any Deductions
Computed Monthly Income: \$2,083 Gross Annual Income / 12 = Computed Monthly Income. Report in Step 3		

If self-employed, add your yearly income and then select Next Step. If not self-employed, go to Next Step

Application for Free and Reduced Price School Meals

Steps: Application for Free and Reduced Price School Meals [Previous] **Next Step** [Print] [Back]

Letter to Household
Instructions for Applying
Federal Income Chart
Use of Information Statement
Non-discrimination Statement
Income from Self-Employment

Application

- Step 1: Child Names
- Step 2: Benefits
- Step 3: Gross Income
- Step 4: Signature
- Optional: Racial and Ethnic Identities

Review and Submit

Step 1 - List ALL Household Members who are infants, children, and students up to and including grade 12. If more spaces are required for additional names, attach another sheet of paper.

Definition of Household Member: Anyone who is living with you and shares income and expenses, even if not related. Children in Foster care and children who meet the definition of Homeless, Migrant or Runaway are eligible for free meals. Read How to Apply for Free and Reduced Price School Meals for more information.

Child's First Name, Middle Initial, Last Name	Child's School	Student?	Foster Child	Homeless, Migrant, Runaway
Stacie Piper	Piper Creek Elementary	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Add name(s) of children in household, if you need more lines for children, select the box above. When finished, select the Next Step Button.

Application for Free and Reduced Price School Meals

Steps: Application for Free and Reduced Price School Meals [Previous] **Next Step** [Print] [Back]

Letter to Household
Instructions for Applying
Federal Income Chart
Use of Information Statement
Non-discrimination Statement
Income from Self-Employment

Application

- Step 1: Child Names
- Step 2: Benefits
- Step 3: Gross Income
- Step 4: Signature
- Optional: Racial and Ethnic Identities

Review and Submit

Step 2 - Do any Household Members (including you) currently participate in one or more of the following assistance programs?

Food Assistance, TANF, or FDRR

If you didn't check the box, **Complete STEP 3.**

If you checked the box, **write a case number here then go to Step 4 (Do not complete STEP 3)**

Case Number:

If you qualify for the assistance listed on this page, check the box and be sure to add your case number, then select the Next Step button. If you do not qualify, just select the Next Step button and continue.

Application for Free and Reduced Price School Meals

Steps: Application for Free and Reduced Price School Meals [Previous] **Next Step** [Print] [Back]

Letter to Household
Instructions for Applying
Federal Income Chart
Use of Information Statement
Non-discrimination Statement
Income from Self-Employment

Application

- Step 1: Child Names
- Step 2: Benefits
- Step 3: Gross Income
- Step 4: Signature
- Optional: Racial and Ethnic Identities

Review and Submit

Step 3 - Report Income for ALL Household Members (Skip this step if you answered "Yes" to STEP 2)

Please read Instructions for Applying for more information. The Sources of Income for Children section will help you with the Child Income question. The Sources of Income for Adults section will help you with the All Adult Household Members section.

A. Child Income
Sometimes children in the household earn income. Please include the TOTAL income earned by all children in household listed in STEP 1 here.

Gross Income and How Often It Was Received (?)
Child Income:

B. All Adult Household Members (including yourself)
List all Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they do receive income, report total income for each source in whole dollars only. If they do not receive income from any source, write "0". If you enter "0" or leave any fields blank, you are certifying (on penalty of perjury) that there is no income to report.

Name of Adult Household Members First Name, Middle Initial, Last Name	Earnings from Work	Public Assistance, Child Support, Alimony	Pensions, Retirement, All Other Income
(Example) Jane A. Smith	\$300 M	\$150 B	\$50 M
Doris Piper	\$2,500 M	\$0	\$0
Deb Piper	\$50 M	\$0	\$0
	\$0	\$0	\$0
	\$0	\$0	\$0
	\$0	\$0	\$0
	\$0	\$0	\$0

* Total Household Members (Children and Adults):

* Last Four Digits of Social Security Number (SSN) of Primary Wage Earner or Other Adult Household Member: ****

Add child's income if there is any. List all the adults and household members who have earnings. Select if it is weekly, monthly, etc. List the number of Household Members. Enter your last four numbers of social security number, or check the box to No SSN.

Application for Free and Reduced Price School Meals

Steps: Application for Free and Reduced Price School Meals Previous **Next Step** Print Back

Letter to Household
Instructions for Applying
Federal Income Chart
Use of Information Statement
Non-discrimination Statement
Income from Self-Employment

Application

- Step 1: Child Names
- Step 2: Benefits
- Step 3: Gross Income
- Step 4: Signature
- Optional: Racial and Ethnic Identities

Review and Submit

I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and that school officials may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws.

Street Address (if available): Daytime Phone: (913) 721-2088 Ext.:
 City: Kansas City State: KS Zip Code: 66109
 * Printed name of adult completing the form: Dora Piper * Signature of adult completing the form: Signed Electronically: Remove
 Today's Date: 06/29/2020 Email (optional):

Fill in the address and phone number information. Key in your Name and then on the Signature of adult completing the form click on the "Click to Sign" link, read the statement and approve... Go to Next Step

Application for Free and Reduced Price School Meals

Steps: Application for Free and Reduced Price School Meals Previous **Next Step** Print Back

Letter to Household
Instructions for Applying
Federal Income Chart
Use of Information Statement
Non-discrimination Statement
Income from Self-Employment

Application

- Step 1: Child Names
- Step 2: Benefits
- Step 3: Gross Income
- Step 4: Signature
- Optional: Racial and Ethnic Identities

Review and Submit

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.

I would like to report this optional information

Ethnicity (check one): Hispanic/Latino Not Hispanic/Latino
Race (check one or more): Asian American Indian or Alaska Native Black or African American White Native Hawaiian or Other Pacific Islander

This is optional but if you chose to answer, check the box next to "I would like to report the optional information, make your selections and click on the Next Step Button."

Application for Free and Reduced Price School Meals

Steps: Application for Free and Reduced Price School Meals Previous Print Back

Letter to Household
Instructions for Applying
Federal Income Chart
Use of Information Statement
Non-discrimination Statement
Income from Self-Employment

Application

- Step 1: Child Names
- Step 2: Benefits
- Step 3: Gross Income
- Step 4: Signature
- Optional: Racial and Ethnic Identities

Review and Submit

Please review the completed application and click the button to submit the application.

NOTE: The application has not yet been submitted. This application will not be considered until the Submit Application button is clicked.

Step 1 - List ALL Household Members who are infants, children, and students up to and including grade 12.
If more spaces are required for additional names, attach another sheet of paper.
Definition of **Household Member**: Anyone who is living with you and shares income and expenses, even if not related.
Children in **Foster care** and children who meet the definition of **Homeless, Migrant or Runaway** are eligible for free meals. Read **How to Apply for Free and Reduced Price School Meals** for more information.

Child's First Name, Middle Initial, Last Name	Child's School	Student?	Check all that apply Foster Child Homeless, Migrant, Runaway
Sunny Piper	Piper Creek Elementary	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

Review the application and if everything looks right, click on the Submit Application button.

Step 2 - Do any Household Members (including you) currently participate in one or more of the following assistance programs?
 Food Assistance, TANF, or FDBR
 If you didn't check the box: **Complete STEP 3.**
 If you checked the box: **Write a case number here then go to Step 4 (Do not complete STEP 3)**
 Case Number:

Step 3 - Report Income for ALL Household Members (Skip this step if you answered 'Yes' to STEP 2)
Please read **Instructions for Applying** for more information. The **Sources of Income for Children** section will help you with the **Child Income** question. The **Sources of Income for Adults** section will help you with the **All Adult Household Members** section.

A. Child Income
Sometimes children in the household earn income. Please include the TOTAL income earned by all children in household listed in STEP 1 here.
Gross Income and How Often It Was Received
 Child Income: