Dear Parent/Guardian:

All enrolled students, at **Bishop Dwenger High School** are eligible to receive a healthy lunch at no charge to your household. No further action is required of you. Your child(ren) will be able to participate in the meal programs without having to pay a fee or complete an application. Households should still fill out an application if they would like to be eligible for other educational benefits. Some examples of other educational benefits may include curricular (textbook) assistance, test/exam fee reduction or waiver, and eligibility for other discounts or program opportunities.

1. WHO CAN GET FREE OR REDUCED PRICE BENEFITS?

- All children in households receiving benefits from SNAP (Food Stamps) or TANF, are eligible for free benefits.
- Foster children that are under the legal responsibility of a foster care agency or court are eligible for free benefits.
- Children participating in their school's Head Start program are eligible for free benefits.
- Children who meet the definition of homeless, runaway, or migrant are eligible for free benefits.
- Children may receive free or reduced benefits if your household's income is within the limits on the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced benefits if your household income falls at or below the limits on this chart.

FEDERAL ELIGIBILITY INCOME CHART For School Year 2021-22			
Household size	Yearly	Monthly	Weekly
1	23,828	1,986	459
2	32,227	2,686	620
3	40,626	3,386	782
4	49,025	4,086	943
5	57,424	4,786	1,105
6	65,823	5,486	1,266
7	74,222	6,186	1,428
8	82,621	6,886	1,589
Each additional person:	+8,399	+700	+162

- 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 benefits, please call or e-mail **Amy Johns at 260-496-4710 or AJohns@bishopdwenger.com**.
- 3. DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD? No. Use one Free and Reduced Price School Meals Application for all students in your household who attend Bishop Dwenger High School. We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to: Tom Tidwell 1300 E. Washington Ctr. Rd. Fort Wayne, IN 46825.
- SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE BENEFITS? No, but please read the letter you got carefully and follow the instructions. If any children in your household were missing from your eligibility notification, contact Tom Tidwell 1300 E. Washington Ctr. Rd. Fort Wayne, IN 46825 260-496-4704 ttidwell@bishopdwenger.com.
- 5. MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT A NEW ONE? Yes. Your child's application is only good for that school year and for the first few days of this school year through **September 24**. You must send in a new application unless the school told you that your child is eligible for the new school year. If you

do not send in a new application that is approved by the school or you have not been notified that your child is eligible for free benefits, your child will be charged the full price of curricular fees.

- 6. SHOULD I FILL OUT AN APPLICATION IF MY CHILDREN RECEIVED FREE OR REDUCED BENEFITS AT THEIR PREVIOUS SCHOOL? If it is the beginning of the school year and you have not been notified that your children will receive free or reduced benefits for the upcoming year, you will need to fill out an application. If your children transferred during the school year and they were receiving free or reduced benefits at the previous school, contact **Tom Tidwell 1300 E. Washington Ctr. Rd. Fort Wayne, IN 46825 260-496-4704 ttidwell@bishopdwenger.com**.
- 7. I GET WIC. CAN MY CHILDREN GET FREE BENEFITS? Children in households participating in WIC <u>may</u> be eligible for free or reduced benefits. Please send in an application.
- 8. WILL THE INFORMATION I GIVE BE CHECKED? Yes. We may also ask you to send written proof of the household income you report.
- 9. IF I DON'T QUALIFY NOW, MAY I APPLY LATER? Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and reduced benefits if the household income drops below the income limit.
- 10. WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION? You should talk to school officials. You also may ask for a hearing by calling or writing to: Amy Johns 1300 E. Washington Ctr. Rd. Fort Wayne, IN 46825 260-496-4710 AJohns@bishopdwenger.com
- 11. MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN? Yes. You, your children, or other household members do not have to be U.S. citizens to apply for free or reduced benefits.
- 12. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you <u>normally</u> receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
- 13. WHAT IF SOME HOUSEHOLD MEMBERS HAVE NO INCOME TO REPORT? Household members may not receive some types of income we ask you to report on the application, or may not receive income at all. Whenever this happens, please write a 0 in the field. However, if any income fields are left empty or blank, those will also be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you meant to do so.
- 14. WE ARE IN THE MILITARY. DO WE REPORT OUR INCOME DIFFERENTLY? Your basic pay and cash bonuses must be reported as income. If you get any cash value allowances for off-base housing, food, or clothing, it must also be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. Any additional combat pay resulting from deployment is also excluded from income.
- 15. WHAT IF THERE ISN'T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY? List any additional household members on a separate piece of paper, and attach it to your application.
- 16. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for SNAP (Food Stamp) or other assistance benefits, contact your local assistance office or call 1-800-403-0864.

If you have other questions or need help, call **260-496-4704**.

Sincerely,

Tom Tidwell, Business Manager Bishop Dwenger High School

HOW TO APPLY FOR FREE AND REDUCED BENEFITS

Please use these instructions to help you fill out the application for free or reduced benefits. The application must be filled out completely to certify your children for free or reduced benefits. 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 [School/school district contact here; phone and email preferred].

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

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

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 Bishop Dwenger High School, regardless of age.

A) List each child's name. Print each child's	B) Is the child a student at [name	C) Do you have any foster children? If any children	D) Are any children homeless,
name. Use one line of the application for each	of school/school system here]?	listed are foster children, mark the "Foster Child"	migrant, or runaway? If you believe
child. If there are more children present than	Mark 'Yes' or 'No' under the	box next to the child's name. If you are ONLY	any child listed in this section meets
lines on the application, attach a second piece	column titled "Student" to tell us	applying for foster children, after finishing STEP 1,	this description, mark the "Homeless,
of paper with all required information for the	which children attend [name of	go to STEP 4.	Migrant, Runaway" box next to the
additional children.	<mark>school/school district here]</mark> . If	Foster children who live with you may count as	child's name and complete all steps
	you marked 'Yes,' write the name	members of your household and should be listed	of the application.
	of the school building, birthdate,	on your application. If you are applying for both	
	and grade level of the student in	foster and non-foster children, go to step 3.	
	the 'Grade' column to the right.		
	Is the child living with parent or		
	caretaker relative? Mark 'Yes' or		
	'No' next to each child.		
			1

STEP 2: DO ANY HOUSEHOLD MEMBERS CURRENTLY PARTICIPATE IN SNAP or TANF?

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 benefits:

- The Supplemental Nutrition Assistance Program (SNAP).
- Temporary Assistance for Needy Families (TANF).

) If no one in your household participates in any of the	B) If anyone in your household participates in any of the above listed programs:
bove listed programs:	• Write a case number for SNAP or TANF. You only need to provide one case number. If you participate in
Leave STEP 2 blank and go to STEP 3.	one of these programs and do not know your case number, contact: 1-800-403-0864.
	• Go to STEP 4.

STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

How do I report my income?

• Use the charts titled "Sources of Income for Adults" and "Sources of Income for Children," located below to determine if your household has income to report.

Sources of Income for Children		Sources of Income for Adults		
Sources of Child Income	Example(s) -A child has a regular full or part-time job where	Earnings from Work	Public Assistance/ Alimony/Child Support	Pension/Retirement/ All Other Income
-Earnings from work	they earn a salary or wages	-Salary, wages, cash bonuses	-Unemployment benefits	-Social Security (including
-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 	-Net income from self- employment (farm or business) If you are in the U.S. Military: -Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing	-Supplemental Security blac Income (SSI) -Priv -Cash assistance from disa	railroad retirement and black lunch benefits) -Private pensions or disability benefits -Regular income from trusts or estates -Annuities -Investment income -Earned interest
-Income from person outside the household	-A friend or extended family member regularly gives a child spending money		(do NOT include combat pay, -Alimony payments	
-Income from any other source	-A child receives regular income from a private pension fund, annuity, or trust	-Allowances for off-base housing, food and clothing	-Strike benefits	-Rental income -Regular cash payments from outside household

• Report all amounts in GROSS INCOME ONLY. Report all income in whole dollars. Do not include cents.

- \circ \quad Gross income is the total income received before taxes
- 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 combined 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 members 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:

- People who live with you but are not supported by your household's income AND do not contribute income to your household.
- Infants, Children and students already listed in **STEP 1.**

B) List adult household members'	C) Report earnings from work. Report all income from work in the	D) Report income from public assistance/child
names. Print the name of each	"Earnings from Work" field on the application. This is usually the	support/alimony. Report all income that applies in the "Public
household member in the boxes marked	money received from working at jobs. If you are a self-employed	Assistance/Child Support/Alimony" field on the application. Do
"Names of Adult Household Members	business or farm owner, you will report your net income.	not report the cash value of any public assistance benefits NOT
(First and Last)." <u>Do not list any</u>	What if I am self-employed? Report income from that work as a	listed on the chart. If income is received from child support or
household members you listed in STEP	net amount. This is calculated by subtracting the total operating	alimony, only report court-ordered payments. Informal but
<u>1.</u> If a child listed in STEP 1 has income,	expenses of your business from its gross receipts or revenue.	regular payments should be reported as "other" income in the
follow the instructions in STEP 3, part A.		next part.
E) Report income from	F) Report total household size. Enter the total number of	G) Provide the last four digits of your Social Security Number.
pensions/retirement/all other income.	household members in the field "Total Household Members	An adult household member must enter the last four digits of
	nousenoid members in the neid notal nousenoid members	All addit household member must enter the last rour digits of
Report all income that applies in the	(Children and Adults)." This number MUST be equal to the number	their Social Security Number in the space provided. You are
· · · · ·		•
Report all income that applies in the	(Children and Adults)." This number MUST be equal to the number	their Social Security Number in the space provided. You are
Report all income that applies in the "Pensions/Retirement/ All Other	(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	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
Report all income that applies in the "Pensions/Retirement/ All Other	(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	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

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) Print and sign your name. Print the	B) Provide your contact information.	C) Mail Completed Form to: [Insert	D) Share children's racial and ethnic
name of the adult signing the application	Write your current address in the fields	School/District address here]	identities (optional). On the back of the
and that person signs in the box "Signature	provided if this information is available. If		application, we ask you to share
of adult."	you have no permanent address, this does		information about your children's race and
	not make your children ineligible for free		ethnicity. This field is optional and does
	or reduced benefits. Sharing a phone		not affect your children's eligibility for free
	number, email address, or both is optional,		or reduced benefits.
	but helps us reach you quickly if we need		
	to contact you.		

STEP 5: OTHER BENEFITS – OPTIONAL

The following sections are optional and do not affect your children's eligibility for free or reduced price benefits. Be sure to fill out A) Textbook Assistance, though, if you do want curricular material fee assistance. If this is left blank then your household will be charged the full price of curricular material fees.

A) Textbook (Curricular Material) Assistance	B) Hoosier Healthwise Disclosure
If you want to receive textbook assistance, check 'Yes' and then read, sign, and date the	If you want to share your child's free/reduced eligibility in order to qualify for free or
section to the right. If you do not want to receive textbook assistance, check 'No'.	low-cost health insurance under Medicaid or Hoosier Healthwise, sign and date this
	section.