

**Nonpricing Letter to Households  
National School Lunch Program/School Breakfast Program**

(use with Exhibit IIA)

Dear Parent/Guardian:

The \_\_\_\_\_ school/school district will serve meals each school day at no charge. In order for the district to get federal funds for these meals, we must have an application for any child claimed for free or reduced-price meals. In addition, by signing the Free Health Insurance Opportunity Section on the back of the application, your children may be eligible for free health insurance from the Department of Social and Health Services (DSHS).

All meals meet federal food guidelines. Students who are identified as disabled by their doctor may need different foods. These substitute foods will be made available at no charge. If your child needs this help, please contact us.

Look at the chart. Find your household size. HOUSEHOLD IS: All persons, including parents, children, grandparents, and all people related or unrelated who live in your home and share living expenses. Find your total household income. TOTAL HOUSEHOLD INCOME IS: The income each household member got before taxes. This includes wages, social security, pension, unemployment, welfare, child support, alimony, and any other cash income. In certain cases, foster children are eligible for free and reduced-price meals regardless of your income. If you have foster children living with you and want to apply for them, please contact us.

<b>INCOME CHART</b>					
<b>Effective from</b>					
<b>July 1, 2008 to June 30, 2009</b>					
Household Size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	\$19,240	\$1,604	\$ 802	\$ 740	\$ 370
2	25,900	2,159	1,080	997	499
3	32,560	2,714	1,357	1,253	627
4	39,220	3,269	1,635	1,509	755
5	45,880	3,824	1,912	1,765	883
6	52,540	4,379	2,190	2,021	1,011
7	59,200	4,934	2,467	2,277	1,139
8	65,860	5,489	2,745	2,534	1,267
For each Additional member add:	+6,660	+555	+278	+257	+129

**WHO SHOULD FILL OUT AN APPLICATION?**  
If your total household income is the SAME or LESS than the amount on the chart or you receive Basic Food, take part in the Food Distribution Program on Indian Reservations (FDPIR), or receive Temporary Assistance for Needy Families (TANF) for your children or are applying for a foster child, fill out the application. Return the application to the school. We will notify you if the application is approved or denied.

**WHAT MUST BE ON THE APPLICATION?**  
**For households not getting Basic Food/TANF/FDPIR:**

- Child's name
- Names of all household members
- Income by source for all household members
- Adult household member's signature
- Social security number of the adult household member who signs the application, (or check the "I do not have a social security number" box if the adult signing does not have a social security number)

**For a family getting Basic Food/TANF/FDPIR:**

- Child's name
- Basic Food, TANF, or FDPIR case number
- Adult household member's signature

**For a foster child:**

- Child's name (one per application)
- Child's personal use income
- Adult's signature

The information that you give will be used to determine or prove your child's eligibility for free or reduced-price meals.

**NEW THIS YEAR: FREE OR LOW-COST HEALTH INSURANCE**

If you would like Free or low-cost health insurance for your children, call today to request an application: toll free 1-877-543-7669. The health coverage includes doctor visits, prescriptions, hospital, dental care, eyeglasses and more. You can also fill out and return an application online at [www.ParentHelp123.org](http://www.ParentHelp123.org). Even if your children have private coverage, they may still be eligible for assistance with the monthly premium, co-pays or deductibles. Call or log-on today to receive more information.

DSHS will download the names of all children age birth to 20 into the Office of Superintendent of Public Instruction (OSPI) Core Student Record System. Information will include the child's first name, last name, middle initial, and date of birth. Upon receipt of this information, OSPI will match student names against the DSHS file and then make the "match" data available to each district via the Internet. Students will automatically qualify for free meals if their schools participate in the U. S. Department of Agriculture (USDA) Child Nutrition Programs. Households that do not want their child(ren) to participate in the free meal program should notify the child(ren)'s school.

**PROOF OF ELIGIBILITY**

The information you provide may be verified at any time. You may be asked to send information to prove your child is eligible to receive free and reduced-price meals.

**FAIR HEARING**

If you do not agree with the decision on your child's application or the process used to prove income eligibility, you may talk with \_\_\_\_\_, the fair hearing official. You have the right to a fair hearing which may be arranged by calling the school/school district at this number \_\_\_\_\_.

**REAPPLICATION**

You may apply for benefits any time during the school year. If you should have a decrease in household income, an increase in household size, or become unemployed, or receive Basic Food, TANF, or FDPIR, you may want to fill out an application at that time.

**NONDISCRIMINATION**

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, sex, or disability. Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue SW, Washington, DC 20250-9410 or call (800) 795-3272 or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.