

Check if Error Prone Application

**1. All Household Members (Attach another sheet of paper if necessary.)**

NAMES OF ALL HOUSEHOLD MEMBERS First, Middle Initial, Last	(for Student only) School Name	(for Student only) Grade	SNAP OR TANF CASE NUMBER ONLY Skip to Part 4 if you list a SNAP or TANF case number. At least one SNAP/ TANF must be provided below. If you receive Medicaid and were not directly certified for free meals, you <b>MUST</b> apply based on household size and income.								Check if Foster Child*
										<input type="checkbox"/>	
										<input type="checkbox"/>	
										<input type="checkbox"/>	
										<input type="checkbox"/>	
										<input type="checkbox"/>	
										<input type="checkbox"/>	

\* A foster child is the legal responsibility of a welfare agency or court.

**2. Homeless, Migrant, Runaway, or Head Start (Categorically eligible)**

Homeless  Migrant  Runaway  Head Start

Signature of Your School Homeless Liaison, Migrant Coordinator, or Head Start Director \_\_\_\_\_

Date \_\_\_\_\_

**3. Total Household Gross Income (before deductions) You must tell us how much and how often.**

A. NAMES (LIST ALL HOUSEHOLD MEMBERS WITH INCOME)	GROSS INCOME AND HOW OFTEN IT WAS RECEIVED (Example: \$100/month, \$100 twice a month, \$100/very other week, \$100/week)							
	B. Earnings From Work (Before Deductions)		C. Welfare, Child Support, Alimony		D. Pensions, Retirement, Social Security		E. Worker's Comp, Unemployment, SSI, etc. (All other income)	
	Amount	How often?	Amount	How often?	Amount	How often?	Amount	How often?
i.	\$		\$		\$		\$	
ii.	\$		\$		\$		\$	
iii.	\$		\$		\$		\$	
iv.	\$		\$		\$		\$	
v.	\$		\$		\$		\$	

**4. Signature and Social Security Number (Adult must sign)**

An adult household member must sign the application. If Part 3 is completed, the adult signing the form must also list the last four digits of his or her social security number or mark the I do not have a social security number box.

  X  X  X  -  X  X   Social Security Number

I do not have a social security number.

I certify (promise) all information on this application is true and all income is reported. I understand the school will get Federal funds based on the information I give. I understand school officials may verify (check) the information. I understand if I purposely give false information, my children may lose meal benefits and I may be prosecuted.

Date \_\_\_\_\_

Printed Name of Adult Household Member \_\_\_\_\_

Signature of Adult Household Member \_\_\_\_\_

**5. Contact Information (Optional)**

Work Telephone Number (Include Area Code) \_\_\_\_\_ Home Telephone Number (Include Area Code) \_\_\_\_\_ Home Address (Number, Street, City, State, Zip Code) \_\_\_\_\_

**6. Children's Racial and Ethnic Identities (Optional)**

Mark one ethnic identity:

- Hispanic/Latino
- Not Hispanic/Latino

Mark one or more racial identities:

- Asian
- White
- Black or African American
- American Indian or Alaska Native

Native Hawaiian or Other Pacific Islander

**- THE FOLLOWING SECTIONS ARE FOR SCHOOL USE ONLY -**

**INITIAL DETERMINATION**

TOTAL INCOME \$ \_\_\_\_\_ Per:  Week  Every 2 Weeks  Twice a Month  Month  Year NUMBER IN HOUSEHOLD: \_\_\_\_\_ CHANGE IN STATUS: \_\_\_\_\_ Date \_\_\_\_\_

LEAs must annualize income only when multiple incomes, at varying frequencies, are reported.

Annual Income Conversion Weekly X 52 Every 2 Weeks X 26 Twice a Month X 24 Once a Month X 12

Free based on:

- homeless
- migrant
- runaway
- Head Start

SNAP or TANF

- foster child
- household's income

Reduced based on:

- household's income

Denied—Reason:

- income too high
- incomplete application
- Non-qualifying SNAP/TANF

Date Withdrawn: \_\_\_\_\_

Signature of Determining Official \_\_\_\_\_

Date: \_\_\_\_\_

## FISCAL YEAR 2024 INCOME ELIGIBILITY GUIDELINES

The United States Department of Agriculture has issued the following income guidelines for the period July 1, 2023, through June 30, 2024:

Income Eligibility Guidelines Effective from July 1, 2023, to June 30, 2024														
Household Size	Free Meals					Household Size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly	Reduced-Workweek 100% Federal Poverty Guideline		
	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly							Monthly	Twice Per Month	Every Two Weeks
1	18,954	1,580	790	729	365	25,973	2,248	1,124	1,034	519	[REDACTED]	[REDACTED]	[REDACTED]	
2	25,636	2,137	1,069	986	493	36,483	3,041	1,521	1,404	702	[REDACTED]	[REDACTED]	[REDACTED]	
3	32,318	2,694	1,347	1,243	622	45,993	3,833	1,917	1,766	885	[REDACTED]	[REDACTED]	[REDACTED]	
4	39,000	3,250	1,625	1,500	750	55,500	4,625	2,312	2,135	1,068	[REDACTED]	[REDACTED]	[REDACTED]	
5	45,682	3,807	1,904	1,757	879	65,089	5,418	2,709	2,511	1,251	[REDACTED]	[REDACTED]	[REDACTED]	
6	52,364	4,364	2,182	2,014	1,007	74,518	6,218	3,105	2,887	1,434	[REDACTED]	[REDACTED]	[REDACTED]	
7	59,046	4,921	2,461	2,271	1,136	84,027	7,084	3,542	3,292	1,616	[REDACTED]	[REDACTED]	[REDACTED]	
8	65,728	5,478	2,739	2,528	1,264	93,536	7,785	3,898	3,598	1,799	[REDACTED]	[REDACTED]	[REDACTED]	
For each additional family member, add	6,682	557	279	257	129	9,509	783	397	369	183	[REDACTED]	[REDACTED]	[REDACTED]	

The following is the definition of income:

Income is defined as any monies earned before any deductions such as income taxes, social security taxes, insurance premiums, charitable contributions, and bonds. It includes the following: (1) monetary compensation for services including wages, salary, commissions, or fees; (2) net income from non-farm self-employment; (3) net income from farm self-employment; (4) social security; (5) dividends or interest on savings or bonds or income from estates or trusts; (6) net rental income; (7) public assistance or welfare payments; (8) unemployment compensation; (9) government civilian employee or military retirement or pensions or veteran payments; (10) private pensions or annuities; (11) alimony or child support payments; (12) regular contributions from persons not living in the household; (13) net royalties; and (14) other cash income. Other cash income would include cash amounts received or withdrawn from any source including savings, investments, trust accounts, and other resources which would be available to pay the price of a child's meal.