

Application for d Reduced Price School Meals

St. Mary’s High School does not participate in the Federal Free and Reduced Lunch Program, we have very limited funds allocated for reduced lunches for those that qualify. The Reduced Lunch is half the price of the Personal Touch Food Service Value Meal. To apply for the St. Mary’s Reduced Lunch Program, complete this application including your income verification and return it by mail or email to: Melanie Adams at madams@smhlancers.org or mailed to: St. Mary’s High School Attn: M Adams142 Laverack Avenue Lancaster, NY 14086. Applications must be received by August 30, 2023. All information provided will remain confidential.

Completed applications to be submitted to: Melanie Adams madams@smhlancers.org or mailed to:

St. Mary’s High
School Attn: M Adams
142 Laverack Avenue

Lancaster, NY 14086

All information provided will remain *confidential*.

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

Child’s First Name	MI	Child’s Last Name	Grade	Student? Yes No	Foster Child	Homeless Migrant, Runaway

STEP 2 Report Income for ALL Household Members

A. Child Income

Sometimes children in the household earn or receive income. Please include the TOTAL income received by all Household Members listed in STEP 1 here.

Child income

\$

How often?

Weekly

Bi-Weekly

2x Month

Monthly

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 gross income (before taxes) for each source in whole dollars (no cents) only. If they do not receive income from any source, write ‘0’. If you enter ‘0’ or leave any fields blank, you are certifying (promising) that there is no income to report.

Name of Adult Household Members (First and Last)	Earnings from Work	How often?				Public Assistance/ Child Support/Alimony	How often?				Pensions/Retirement/ All Other Income	How often?				
		Weekly	Bi-Weekly	2x Month	Monthly		Weekly	Bi-Weekly	2x Month	Monthly		Weekly	Bi-Weekly	2x Month	Monthly	
	\$															
	\$															
	\$															
	\$															
	\$															

Total Household Members
(Children and Adults)

Last Four Digits of Social Security Number

X

X

X

Primary Wage Earner or Other Adult Household Member

X

X

Check if no SSN

STEP 3Contact information and adult signature. Mail Completed Form To: St. Mary's High School, 142 Laverack Avenue, Lancaster, NY

"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."

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address (if available)	Apt #	City	State	Zip
<input type="text"/>		<input type="text"/>		<input type="text"/>
Printed name of adult signing the form		Signature of adult		Today's date

INSTRUCTIONS**Sources of Income**

Sources of Income for Children	
Sources of Child Income	Example(s)
- Earnings from work	- A child has a regular full or part-time job where they earn a salary or wages
- Social Security <ul style="list-style-type: none">- 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
-Income from person outside the household	- A friend or extended family member regularly gives a child spending money
-Income from any other source	- A child receives regular income from a private pension fund, annuity, or trust

Sources of Income for Adults		
Earnings from Work	Public Assistance / Alimony / Child Support	Pensions / Retirement / All Other Income
<ul style="list-style-type: none">- Salary, wages, cash bonuses- Net income from self-employment (farm or business) <p>If you are in the U.S. Military:</p> <ul style="list-style-type: none">- Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances)- Allowances for off-base housing, food and clothing	<ul style="list-style-type: none">- Unemployment benefits- Worker's compensation- Supplemental Security Income (SSI)- Cash assistance from State or local government- Alimony payments- Child support payments- Veteran's benefits- Strike benefits	<ul style="list-style-type: none">- Social Security (including railroad retirement and black lung benefits)- Private pensions or disability benefits- Regular income from trusts or estates- Annuities- Investment income- Earned interest- Rental income- Regular cash payments from outside household

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.

Ethnicity (check one): ☐ Hispanic or Latino ☐ Not Hispanic or Latino

Race (check one or more): ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White

This institution is an equal opportunity provider.

Annual Income Conversion: Weekly x 52, Every 2 Weeks x 26, Twice a Month x 24 Monthly x 12

Total Income

How often?			
Weekly	Bi-Weekly	2x Month	Monthly
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Household Size

Categorical Eligibility

☐

Eligibility:

Free	Reduced	Denied
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Determining Official's Signature

Date

Confirming Official's Signature

Date

Verifying Official's Signature

Date