

Oregon School District

123 East Grove Street Oregon, WI 53575

Application Instructions for Free and Reduced Price Meals and Summer School Course Fees

To apply for free and reduced price meals, complete the application using the instructions for your household. Sign the application and return the application to ROBYN WOOD. Please complete a separate application for each foster child. PLEASE COMPLETE ONE APPLICATION FOR EACH HOUSEHOLD. Call Robyn Wood, Food Service Director, if you need help: 835- 4036.

PLEASE RETURN THE COMPLETED FORM TO ROBYN WOOD IN THE DISTRICT OFFICE.
DO NOT RETURN TO YOUR SCHOOL OFFICE.

PART ONE: STUDENT INFORMATION: All households complete this part.

- (1) Print the names of **ALL** the children you are applying for.
- (2) List their grade and school.

PART TWO: HOUSEHOLDS GETTING FOOD SHARE OR W-2: Complete this Part and Part 6.

- (1) List a current food share **case** number or W-2 **case** number for **each** child. DO NOT use case numbers for Medicaid, SSI, W-2 Childcare, or Quest card.
- (2) Sign the application in PART 6. An adult household member must sign. Skip Parts 3, 4, and 5. Do not list names of household members or income if you list a food share or W-2 case number for each child.

PART THREE: HOUSEHOLDS WITH A FOSTER CHILD: Complete this Part and Part 6 - a foster child is the legal responsibility of a welfare agency or court.

- (1) List the foster child's monthly "personal use" income. Write "0" if the foster child does not get "personal use" income. Skip Parts 4 and 5 - Do not list any other children, household members or income.
- (2) A foster parent or other official representing the child must sign the application in Part 6. "Personal use" income is (a) money given by the welfare office identified by category for the child's personal use, such as allowances; and (b) all other money the child gets, such as money from his/her family and money from the child's full-time or regular part-time jobs.

PART FOUR: HOMELESS/MIGRANT/RUNAWAY: Complete this part if you are applying for a child who is homeless, migrant, or runaway. Call Jane Peschel at 835-4002. Sign the application in Part 6. If there is an address to send the notification letter to, please fill out that portion of Part 6, otherwise write "NONE".

PART FIVE: ALL OTHER HOUSEHOLDS: Complete this Part and Part 6.

- (1) Write the names of **everyone** in your household, whether they get income or not. **Include** yourself, the children you are applying for, all other children, your spouse, grandparents, and other related and unrelated people in your household. Use another piece of paper if you need more space.
- (2) Write the amount of income each household member got last month, before taxes or anything else is taken out, and where it came from, such as earnings, welfare, pensions, and other income. If any amount last month was more or less than usual, write that person's usual monthly income. To figure Monthly Income: Weekly x 4.33; Every Two Weeks x 2.15; Twice a Month x 2
- (3) If there was no income, check the box in the right column.
- (4) An adult household member must sign the application and give his/her social security number in Part 6.

PART SIX: SIGNATURE AND SOCIAL SECURITY NUMBER: All households complete this part.

- (1) All applications must have the signature of an adult household member.
- (2) The application must have the social security number of the adult who signs. If the adult does not have a social security number, write "none" or something else to show that the adult does not have a social security number.

PART SEVEN: RACIAL/ETHNIC IDENTITY: Complete the racial/ethnic identity question if you wish. You are not required to answer this question to get pool passes. We need this information to make sure that everyone is treated fairly.

INCOME TO REPORT

EARNINGS FROM WORK:	WELFARE/CHILD SUPPORT/ ALIMONY:	PENSIONS/RETIREMENT/ SOCIAL SECURITY:	OTHER INCOME:
Wages/Salaries/Tips Strike benefits Unemployment compensation Worker's compensation Net income from self-owned business or farm	Public assistance payments Welfare payments Alimony/child support payments	Pensions Supplemental Security Income Retirement income Veteran's payments Social security	Disability benefits Cash withdrawn from savings Interests/Dividends Incomes from Estates/Trusts/Investments Regular contributions from persons not living in the household Net royalties/annuities/net rental income Any other income

Please keep these application instructions for your reference.

Do not return to your school office.

**Return to Robyn Wood in the District Office
123 East Grove Street, Oregon, WI 53575**

Return only the completed application