

INSTRUCTIONS FOR APPLYING FOR FREE / REDUCED MEALS

If your household gets FOODSHARE OR W-2 CASH BENEFITS, follow these instructions:

Part 1: List child(ren)'s name, school, grade, and a FoodShare, W-2 cash benefits, or Food Distribution Program on Indian Reservations (FDPIR) case number.

Part 2: List the appropriate case number, if applicable.

Part 3: Skip this part.

Part 4: Skip this part.

Part 5: Skip this part.

Part 6: Please provide Social Security number. Be sure to SIGN THE FORM, and fill in your printed name and address, including zip code if outside of Oregon.

Part 7: Answer this question if you choose to.

If you are applying for a child that is HOMELESS, MIGRANT or a RUNAWAY, follow these instructions:

Check the appropriate box in **Part 4** and contact Jane Peschel at 835-4002

Fill out application by following instructions for **ALL OTHER HOUSEHOLDS**.

If you are applying for a FOSTER CHILD, follow these instructions:

Part 1: Use a separate application for each foster child. List the child's name, school, and grade.

Part 2: Do not fill in food share or W-2 cash benefits.

Part 3: Check the box and list the child's personal use monthly income, if any.

Part 4: Skip this part.

Part 5: Skip this part.

Part 6: A social security number is not necessary, but **you must sign the form**. Please include your printed name and address, including zip code if outside of Oregon.

ALL OTHER HOUSEHOLDS, including WIC households, follow these instructions:

Part 1: List each child's name, school, and grade.

Part 2: Check the appropriate box, if any.

Part 3: Skip this part.

Part 4: Skip this part.

Part 5: Follow these instructions to report total household income from last month.

Column 1–Name: List the first and last name of **each** person living in your household, related or not (such as grandparents, other relatives, or friends). You must include yourself and all children living with you. Attach another sheet of paper if you need to.

Column 2 –Gross income last month and how often it was received. Next to each person's name list each type of income received last month, and how often it was received. For example, *Earnings from work*: List the **gross income** each person earned from work. This is not the same as take-home pay. **Gross income is the amount earned before taxes and other deductions.** The amount should be listed on your pay stub, or your boss can tell you. Next to the amount, write how often the person got it (weekly, every other week, twice a month, or monthly). *All other income*: List the amount each person got last month from welfare, child support, alimony, pensions, (second column) pensions, retirement Social Security (third column), and ALL OTHER INCOME SOURCES (fourth column). In the Any Other column, include Worker's Compensation, unemployment, strike benefits, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), disability benefits, regular contributions from people who do not live in your household, and ANY OTHER INCOME. Report net income for self-owned business, farm, or rental income. Next to the amount, write how often the person got it. If you are in the Military Housing Privatization Initiative do not include this housing allowance.

Column 6–Check if no income: If the person does not have any income, check the box.

Part 6: An adult household member must sign the form and list his or her Social Security Number, or mark the box if he or she doesn't have one. Don't forget your printed name and address, including zip code if outside of Oregon.

Part 7: Answer this question if you choose to.

PLEASE KEEP THESE APPLICATION INSTRUCTIONS FOR YOUR REFERENCE.

DO NOT RETURN TO YOUR SCHOOL OFFICE. RETURN ONLY THE COMPLETED APPLICATION.

Return to: ROBYN WOOD – District Office, 123 East Grove Street, Oregon 53575