

Notification of Eligibility for School Meals

School Year 20__-20__

Dear Parent/Guardian:

offers no-cost

to all students this school year.

However, we still must track whether students meet federal free and reduced-price school meal guidelines so that can access certain state and federal funding. Because you applied for free or reduced-price school meals, we are providing this notice of determination as a courtesy. Again, all students receive no-cost meals regardless of the determination.

You applied for free or reduced-price school meals for the following students;

_____	_____
_____	_____
_____	_____

Your income was processed via:

- ☐ Household income application, which determines eligibility based on reported information including household size and income or participation in approved assistance programs
- ☐ Combination form, which determines eligibility by combining the free and reduced-price lunch application and Family Economic Data Survey (FEDS) information

Your eligibility was determined to be:

- ☐ Approved for **free school meals** because your income is within the free school meal eligibility limits.
- ☐ Approved for **reduced-price school meals** because your income is over the free school meal limit but within the reduced-price school meal eligibility limits. However, because there is **no cost for**
) for all students, your child(ren) will not have to pay anything for
school meals.
- ☐ **Denied** for the following reason(s):
 - ☐ Income over the allowable amount
 - ☐ Incomplete application because
 - ☐ Other

To repeat: **There is no cost for** **for all students. This determination does not impact your child's access to no-cost meals.**

You have the following students in a Community Eligibility Provision school(s) and are not required to apply for school meals via an income application:

_____	_____
_____	_____
_____	_____

- ☐ Approved for **free school meals** because your school meets the federal poverty threshold. This threshold is based on a percentage of students or family members' participation in certain assistance programs.

If you do not agree with the determination, you may discuss it with _____ at _____ or at _____. If your income or household size changes or you have become eligible for SNAP, TANF or FDPIR, you can re-apply at any time throughout the school year. **Again, this determination does not affect your child's access to no-cost meals, which are available to all our students.**

If you wish to review the decision further, you have a right to a fair hearing. This can be done by calling or writing the following official:

School Official's name:

Address:

Phone Number:

E-mail:

Sincerely,

For more information on eligibility determinations, visit the [CDE School Nutrition website](#).

Non-discrimination Statement: In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail:
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW Washington,
D.C. 20250-9410; or
2. fax:
(833) 256-1665 or (202) 690-7442; or
3. email:
program.intake@usda.gov

This institution is an equal opportunity provider.