

Verification Tracker**Attach to top of each application for Verification****Student/Family Name:**_____ **Application Number:**_____ **School Year:**_____

Date of Second Party Review:_____ Second Party Reviewer Signature_____

Date Verification Notice Sent:_____ Date Response Due from Household:_____

Date Second Notice Sent (or N/A):_____ Date Documentation is Received from Household: _____

Number of Students on Application:_____ Total Number of People in the Household:_____

Original Approval

- ☐ Free Eligible based on SNAP/TANF/FDPIR benefits
- ☐ Free Eligible based on Foster Child status
- ☐ Free Eligible Based on Income/Household Size Information
- ☐ Reduced Price Eligible

Document calculations/conversations with the household/notes in the space below:**Verification Results**

- | | |
|---|--|
| <input type="checkbox"/> No Change | <input type="checkbox"/> Reduced Price Eligible Based on Income/Household Size Information |
| <input type="checkbox"/> Free Eligible Based on SNAP/FDPIR benefits | <input type="checkbox"/> Paid Based on Income/Household Size Information or no SNAP/FDPIR benefits |
| <input type="checkbox"/> Free Eligible based on Foster Child status | <input type="checkbox"/> Paid as Household Did Not Respond |
| <input type="checkbox"/> Free Eligible Based on Income/Household Size Information | |

Date the Notice of findings letter was sent (Attachment 6):_____

Date Change was made (10 days adverse action if needed):_____

Verifying official's signature:_____

If Hearing is Requested: Date Hearing Requested:_____

Hearing decision date:_____

Date Verification Complete:_____

Hearing Official's Signature:_____

Reapplied With Documentation Results (show calculations below):

Date documentation is Received from Household:_____

- | | |
|--|---|
| <input type="checkbox"/> Denied Based on Income/Household size Information | <input type="checkbox"/> Free Eligible based on Income/Household size information |
| <input type="checkbox"/> Free Eligible based on SNAP/FDPIR benefits | <input type="checkbox"/> Reduced Price Eligible |
| <input type="checkbox"/> Free Eligible based on Foster Child status | |

Date of Re-approval:_____ Determining Official Signature:_____