WILMOT UNION HIGH SCHOOL

Dear Parent/Guardian:

Children need healthy meals to learn. **Wilmot Union High School** offers healthy meals every school day and your family may qualify for free meals or for reduced price meals. The cost for breakfast can be up to **\$3.25** and for lunch can be up to **\$5.25**. Reduced price breakfast is **\$.40** and lunch is **\$.40**. Below are some common questions and answers to aid in the process of determining your child's eligibility.

NOTE: Because Wilmot Union High School is no longer participating in the National School Lunch Program we are unable to directly certify families. Therefore, all families must submit a written application in order to be considered for participation in our free and reduced price meal program.

- 1. MY CHILD'S APPLICATION WAS APPROVED LAST YEAR, DO I NEED TO FILL OUT A NEW ONE?
 - Yes. Your child's application is only good for one school year and for the first 30 days of the new school year.
 - You must submit a new application in order to continue to receive this service.
- 2. DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD?
 - No, if your children attend the same school. In that case, use one Free and Reduced Price School Meals Application for all students in your household.
 - Yes, if your children attend different schools you must return an application to each school.
- 3. WHAT MEAL CHOICES QUALIFY FOR FREE OR REDUCED PRICES?
 - Free/reduced breakfast and lunches can be chosen from Classic Café, Diner Station,
 Fresh Express and the Pizza station.
- 4. WHO CAN RECEIVE FREE MEALS?
 - All children in households receiving benefits from WI SNAP, Food Share, or WI TANF are
 eligible for free meals regardless of your income. In addition, your children qualifies for free
 meals if your household's gross income is within the free limits on the Federal Eligibility
 Income Chart.
- 5. CAN FOSTER CHILDREN GET FREE MEALS?
 - Yes, foster children that are under the legal responsibility of a foster care agency or court, are eligible for free meals.

6. CAN HOMELESS, RUNAWAY, HEAD START, AND MIGRANT CHILDREN GET FREE MEALS?

Yes, children who meet the definition of homeless, runaway, or migrant are eligible for free
meals. If you believe children in your household meet these descriptions and have not
been told your children will get free meals, please call or e-mail Samantha Meyer at
262-862-9003.

WHO CAN RECEIVE REDUCED PRICE MEALS?

• Your children are eligible for reduced price meals if your household income is within the reduced price limits on the Federal Eligibility Income Chart, shown on this application.

8. IF I DO NOT QUALIFY NOW, MAY I APPLY LATER?

Yes, you may apply at any time during the school year. For example, children with a parent
or guardian who becomes unemployed may become eligible for free and reduced price
meals if the household income drops below the income limit.

9. WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION?

You should talk to school officials. You also may ask for a hearing by calling or writing to:
 Mr. Rob Kreil, 11112-308th Avenue, Wilmot WI 53192, phone 262-862-2351.

10. MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN?

 Yes. You or your children do not have to be U.S. citizens to qualify for free or reduced price meals.

11. WHOM SHOULD I INCLUDE AS MEMBERS OF MY HOUSEHOLD?

You must include ALL people living in your household, related or not (such as grandparents, other relatives, or friends) who share income and expenses. You must include yourself and all children living with you. If you live with other people who are economically independent (for example, people who you do not support, who do not share income with you or your children, and who pay a pro-rated share of expenses), do not include them.

12. WHAT IF MY INCOME IS NOT ALWAYS THE SAME?

List the amount that you <u>normally</u> receive. For example, if you normally make \$1000 each
month, but you missed some work last month and only made \$900, put down that you
made \$1000 per month. If you normally get overtime, include it, but do not include it if you
only work overtime sometimes. If you have lost a job or had your hours or wages reduced,
use your current income.

If you have, other questions or need help, call Lisa Obertin at 262-862-2351 ext. 321

Sincerely,

Lisa Obertin

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∞	7	6	5	4	3	2	ъ	Household Size	
\$	Ş	\$	\$	\$	❖	Ş	❖		
93,536	84,027	74,518	65,009	55,500	45,991	36,482	26,973	Yearly	Eligibi
\$	\$	\$	\$	\$	\$	Ş	Ş		lity
7,795	7,003	6,210	5,418	4,625	3,833	3,041	2,248	Monthly	Eligibility Guidelines Reducec
\$	\$	\$	\$	\$	\$	\$	\$		edu
3,898	3,502	3,105	2,709	2,313	1,917	1,521	1,124	Twice-Monthly	ced
\$	\$	\$	\$	\$	\$	\$	\$	Ever	
3,598	3,232	2,867	2,501	2,135	1,769	1,404	1,038	Every 2 Weeks	X
\$	\$	\$	\$	\$	\$	\$	\$		
1,799	1,616	1,434	1,251	1,068	885	702	519	Weekly	

Wilmot Union High School Discounted Milk/Lunch Program Application

				Frequency (weekly,		
Names of everyone in	School	Please mark if	Work Gross Income	every 2 weeks, 2x a		
the household	attending	no income*	(before deductions)	month, monthly)	Other Income	Frequency
		Case #(SNAP, Fo	Case #(SNAP, Food Share, etc.) - #			
				The second secon		

An adult household member must sign the application and also list the last four digits of his/her Social Security number or mark the "I do not have a Social Security number" box.

*If you have no income, please remember that you must list your case number above.

I certify that all information on this application is true and that all income is reported. I understand that school officials may verify the information. I understand that if I purposely give false information my child may lose meal benefits and I may be prosecuted. I understand my child's eligibility information may be shared as allowed by law.

Signature		Last 4 digits of Social Security #	al Security #
		☐ I don't have a Social Security #	ial Security #
Printed Name			Date
Street Address	City	State	Zip

SHARING INFORMATION WITH OTHER PROGRAMS

Dear Parent/Guardian:

To save you time and effort, the information you gave on your Free and Reduced Price School Meals Application may be shared with other programs for which your children may qualify. For the following programs, we must have your permission to share your information. Sending in this form will not change whether your children get free or reduced price meals.

	to share information from my Free and Reduced Price onsideration and determination of reduced or waived
School Meals Application with opportunity to participate i	to share information from my Free and Reduced Price cooperative mailings to offer families the n a Food Drive sponsored by the Student Council nizations (No names are released; a mailing is sent nnel).
	ne boxes above, fill out the form below to ensure that hild(ren) listed below. Your information will be shared d.
Child's Name:	School:
Signature of Parent/Guardian:	Date:
Printed Name:	
Address:	
For more information, you may call to	isa Obertin at 262-862-2751 evt. 721 or o mail at

obertin@wilmoths.kl2.wi.us

RETURN THIS FORM TO:

Wilmet Union High School PO Box 8 Wilmot WI, 53192 Attention: Lisa Obertin