
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 **\$2.50** and for lunch can be up to **\$4.25**. 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 send in 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, the three choices on the Diner Station 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, shown on this application.
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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 **Caralynn Cox at 262-862-9003.**

7. 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:
Mrs. Amber Torres, 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 normally 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

Eligibility Guidelines Reduced

Household Size	Yearly	Monthly	Twice-Monthly	Every 2 Weeks	Weekly
1	\$ 23,606	\$ 1,968	\$ 984	\$ 908	\$ 454
2	\$ 31,894	\$ 2,568	\$ 1,329	\$ 1,227	\$ 614
3	\$ 40,182	\$ 3,349	\$ 1,675	\$ 1,546	\$ 773
4	\$ 48,470	\$ 4,040	\$ 2,020	\$ 1,865	\$ 933
5	\$ 56,758	\$ 4,730	\$ 2,365	\$ 2,183	\$ 1,092
6	\$ 65,046	\$ 5,421	\$ 2,711	\$ 2,502	\$ 1,251
7	\$ 73,334	\$ 6,112	\$ 3,056	\$ 2,821	\$ 1,411
8	\$ 81,622	\$ 6,802	\$ 3,401	\$ 3,140	\$ 1,570
Each additional person add	\$ 8,288	\$ 691	\$ 346	\$ 319	\$ 160

Eligibility Guidelines Free

Household Size	Yearly	Monthly	Twice-Monthly	Every 2 Weeks	Weekly
1	\$ 16,588	\$ 1,383	\$ 692	\$ 638	\$ 319
2	\$ 22,412	\$ 1,868	\$ 934	\$ 862	\$ 431
3	\$ 28,236	\$ 2,353	\$ 1,177	\$ 1,066	\$ 543
4	\$ 34,060	\$ 2,839	\$ 1,420	\$ 1,310	\$ 655
5	\$ 39,884	\$ 3,324	\$ 1,662	\$ 1,534	\$ 767
6	\$ 45,708	\$ 3,809	\$ 1,905	\$ 1,758	\$ 879
7	\$ 51,532	\$ 4,295	\$ 2,148	\$ 1,982	\$ 991
8	\$ 57,356	\$ 4,780	\$ 2,390	\$ 2,206	\$ 1,103
Each additional person	\$ 5,824	\$ 486	\$ 243	\$ 224	\$ 112

Wilmot Union High School Discounted Milk/Lunch Program Application

Names of everyone in the household	School attending	Please mark if no income	Work Gross Income (before deductions)	Frequency (weekly, every 2 weeks, 2x a month, monthly)	Other Income	Frequency

Case #(SNAP, Food Share, etc.) - #

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 to 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 #**

I don't have a Social 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.

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- Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application for consideration and determination of **reduced or waived fees**.
 - Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **cooperative mailings to offer families the opportunity to participate in a Food Drive sponsored by the Student Council and other community organizations (No names are released; a mailing is sent by authorized school personnel)**.

If you checked yes to any or all of the boxes above, fill out the form below to ensure that your information is shared for the child(ren) listed below. Your information will be shared only with the programs you checked.

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Address: _____

For more information, you may call **Lisa Obertin** at **262-862-2351 ext. 321** or e-mail at **obertinl@wilmoths.k12.wi.us**

RETURN THIS FORM TO:
Wilmot Union High School
PO Box 8
Wilmot WI, 53192
Attention: Lisa Obertin