

Instructions for Applying — 2011-2012

If **ALL** children you are applying for are **FOSTER CHILDREN**, follow these instructions (use one application):

Part 1: List each child's Student ID (or Social Security Number), full name, date of birth, mark foster child, grade, and school code (see below).

Part 2: Skip this part.

Part 3: Skip this part.

Part 4: Skip this part.

Part 5: Sign and date the form. The last four digits of a Social Security Number are not necessary.

If your household receives **SNAP (Supplemental Nutrition Assistance Program)** or **TANF (Temporary Assistance For Needy Families)** follow these instructions:

Part 1: List each child's Student ID (or Social Security Number), full name, date of birth, mark foster child, grade, and school code (see below).

Part 2: List the eligibility group number for any household member (including adults) receiving benefits.

Part 3: Skip this part.

Part 4: Skip this part.

Part 5: Sign and date the form. The last four digits of a Social Security Number are not necessary.

If any child in your household is **HOMELESS, a MIGRANT, or RUNAWAY**, follow these instructions.

Part 1: List each child's Student ID (or Social Security Number), full name, date of birth, mark if foster child, grade, and school code (see below).

Part 2: Skip this part.

Part 3: Mark the appropriate box and contact your child's school administrative assistant or counselor.

Part 4: Skip this part.

Part 5: Sign and date the form. The last four digits of a Social Security Number are not necessary.

ALL OTHER HOUSEHOLDS (including WIC households) or if some of your children are foster children, follow these instructions:

Part 1: List each child's Student ID (or Social Security Number), full name, date of birth, mark if foster child, grade, and school code (see below).

Part 2: Skip this part.

Part 3: Skip this part.

Part 4: Follow these instructions to report last month's household income.

Column 1 — Name: List the last, first and middle 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. Attach another application if needed.

Column 2 — Mark if no income: If the person does not have any income, mark the box.

Column 3 — Income and how often it is received: For each person who receives income, write the amount received and mark how often it is received — weekly (W), every 2 weeks (E), twice a month (T) or monthly (M).

Employment Income: List the **gross income** for each person. It is not the same as take-home pay. **Gross income is the amount earned before taxes and deductions.** It should be listed on your pay stub or your boss can tell you. Next to the amount, mark how often you receive it — weekly (W), every 2 weeks (E), twice a month (T) or monthly (M).

Other Income: List the amount each person receives from **all other sources**. Include welfare, child support, alimony, pensions, retirement, Social Security, 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 receives it.

Part 5: An adult household member must sign and date the form and list the last 4 digits of his or her Social Security Number, or mark the "I do not have a Social Security number" box if he or she does not have one.

School Codes			Grade Codes	
Secondary Schools	Elementary Schools			
041 AGNEW MIDDLE	132 ACHZIGER ELEMENTARY	106 McWHORTER ELEMENTARY	PK	Pre-kindergarten
047 BERRY MIDDLE	125 AUSTIN ELEMENTARY	126 MOSS ELEMENTARY	KG	Kindergarten
005 HORN HIGH	119 BEASLEY ELEMENTARY	107 MOTLEY ELEMENTARY	01	First Grade/Grade 1
046 KIMBROUGH MIDDLE	101 BLACK ELEMENTARY	123 PIRRUNG ELEMENTARY	02	Second Grade/Grade 2
044 McDONALD MIDDLE	124 CANNADAY ELEMENTARY	117 PORTER ELEMENTARY	03	Third Grade/Grade 3
656 MESQUITE ACADEMY	102 FLORENCE ELEMENTARY	120 PRICE ELEMENTARY	04	Fourth Grade/Grade 4
001 MESQUITE HIGH	116 FLOYD ELEMENTARY	108 RANGE ELEMENTARY	05	Fifth Grade/Grade 5
045 NEW MIDDLE	103 GALLOWAY ELEMENTARY	109 RUGEL ELEMENTARY	06	Sixth Grade/Grade 6
002 NORTH MESQUITE HIGH	130 GENTRY ELEMENTARY	110 RUTHERFORD ELEMENTARY	07	Seventh Grade/Grade 7
004 POTEET HIGH	128 GRAY ELEMENTARY	114 SEABOURN ELEMENTARY	08	Eighth Grade/Grade 8
048 TERRY MIDDLE	104 HANBY ELEMENTARY	111 SHANDS ELEMENTARY	09	Ninth Grade/Grade 9
042 VANSTON MIDDLE	105 HODGES ELEMENTARY	121 SHAW ELEMENTARY	10	Tenth Grade/Grade 10
003 WEST MESQUITE HIGH	122 KIMBALL ELEMENTARY	129 SMITH ELEMENTARY	11	Eleventh Grade/Grade 11
043 WILKINSON MIDDLE	115 LAWRENCE ELEMENTARY	127 THOMPSON ELEMENTARY	12	Twelfth Grade/Grade 12
	131 MACKKEY ELEMENTARY	112 TISINGER ELEMENTARY		
	118 MCKENZIE ELEMENTARY	113 TOSCH ELEMENTARY		

Privacy Act Statement: This explains how we will use the information you give us.

The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your children for free or reduced-price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced-price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.

Non-discrimination Statement: This explains what to do if you believe you have been treated unfairly. "In accordance with federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write to USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer."