

Free and Reduced Price Benefits Update

School Year 2015-2016

Child and Adult Nutrition Services



south dakota
DEPARTMENT OF EDUCATION

Learning. Leadership. Service.

Family Friendly Application

NEW

2015-2016 Application for Free and Reduced Price School Meals or Free Milk

Complete one application per household. Please use a pen (not a pencil).

New Applicant Previous Applicant

STEP 1

List ALL Household Members who are infants, children, and students up to and including grade 12

(if more spaces are required for additional names, attach another sheet of paper)

Definition of Household Member: "Anyone who is living with you and shares income and expenses, even if not related."

Children in Foster care and children who meet the definition of Homeless, Migrant or Runaway are eligible for free meals. Read How to Apply for Free and Reduced Price School Meals for more information.

Child's Name	Age	Write in name of child's school, or "not in school"	if a student, write in the grade	Foster Child	Homeless, Migrant, Runaway
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

Check all that apply

STEP 2

Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF, or FDPIR?

Circle one: Yes / No

If you answered NO > Complete STEPS 3 and 4.

If you answered YES > Write your 9-digit SNAP or TANF, or the FDPIR case number here then go to STEP 4. If you get Medicaid, or WIC skip STEP 2 and complete STEPS 3 and 4.

Case Number:

Write only one case number in this space.

STEP 3

Report Income for ALL Household Members

(Skip this step if you answered 'Yes' to STEP 2)

Please read How to Apply for Free and Reduced Price School Meals for more information. The Sources of Income for Children section will help you with the Child Income question. The Sources of Income for Adults section will help you with the All Adult Household Members section.

A. Child Income

Sometimes children in the household earn income. Please include the TOTAL income earned by all children listed in STEP 1 here. Report income in whole dollars.

Child Income	How often?				Child Income	How often?			
	Weekly	Bi-Weekly	2x Month	Monthly		Weekly	Bi-Weekly	2x Month	Monthly
\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. All Adult Household Members (including yourself)

List all Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they do receive income, report total income for each source in whole dollars only. If they do not receive income from any source, write '0'. If you enter '0' or leave any fields blank, you are certifying (promising) that there is no income to report.

Name of Adult Household Members (First and Last)	Earnings from Work	How often?				Public Assistance/ Child Support/Alimony	How often?				Farming/ Pensions/ Retirement/Other Income	How often?			
		Weekly	Bi-Weekly	2x Month	Monthly		Weekly	Bi-Weekly	2x Month	Monthly		Annually			
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Household Members (Children and Adults)

Last Four Digits of Social Security Number (SSN) of Primary Wage Earner or Other Adult Household Member

Check if no SSN

STEP 4

Contact information and adult signature. SIGNATURE IS REQUIRED

"I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and that school officials may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws."

Street Address (if available) Apt #

City State Zip

Daytime Phone and Email (optional)

Printed name of adult completing the form

Signature of adult completing the form

Today's date

Carryover of Benefits

- Double check that your 30-operating day carry over ended on the correct date for all students.

SEPTEMBER						
Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			
2015						

OCTOBER						
Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31
2015						

Eligibility Manual for School Meals



- Revised July 2015
- Guidance for all questions about applications, eligibility, direct certification, and verification



No Income Reported on an Application



NEW

- Applications will no longer require a separate indication of no income from the applicant.
- A household with any member income field left blank is a positive indication that there is no income.
- When no income is provided for any of the adult household members, the application is still considered complete.
- Income for all children is consolidated in one income field on the prototype application.
- Remember: temporary approvals for zero income applications went away a few years ago. Once an application is approved, that approval is effective for the remainder of the school year and for 30 operating days into the next school year.

Case Numbers Reported on an Application

- Schools should check the direct certification list for any SNAP or TANF case numbers reported on an application.
- CANS strongly encourages you to look those students up on iMATCH so you can directly certify them.
- If a match is found, the application should be disregarded and direct cert free eligibility must be applied to all children within the household.

STEP 2

Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF, or FDPIR?

Circle one: Yes / No

If you answered NO > Complete STEPS 3 and 4.

If you answered YES > Write your 9-digit SNAP or TANF, or the FDPIR case number here then go to STEP 4. If you get Medicaid, or WIC skip STEP 2 and complete STEPS 3 and 4.

Case Number:

Write only one case number in this space.

For School/Center Use Only Area on Application

- This box must be completely filled out.
- The determining official must sign and date each application.
- There is a new flexibility for schools that use an electronic application method. Contact CANS or page 56 in the Eligibility Manual for more information.

FOR SCHOOL/CENTER USE ONLY	
Total income & how often: _____ - / _____ Household size: _____	SNAP / FDPIR/ TANF or other eligible program household categorically eligible free <input type="checkbox"/> Yes <input type="checkbox"/> No Number of foster children eligible free: _____ Eligibility Classification: <input type="radio"/> Free Rate <input type="radio"/> Reduced Price Rate <input type="radio"/> Paid Rate Date notification sent: _____ Date withdrawn or transferred: _____
Other notes: _____	Signature of Determining Official _____ Date: _____ Signature of Confirmation Official _____ Date: _____

Electronic Application Determinations



- Determining Officials should verify the accuracy of some electronic determinations by hand using the current Income Eligibility Guidelines.
- If your math or eligibility determination doesn't match the electronic determination something is wrong!
- During Administrative Reviews, CANS has found a handful of schools that did not double check their system accuracy and had serious problems with their student eligibility determinations. Email DOE.SchoolLunch@state.sd.us to request sample test scenarios to test your system.

Hot Topics

Foreign Exchange Students (pg. 29)

- *Child Away at School*: A child who is temporarily away at school (e.g., attending boarding school or college) is included as a member of the household.
- A child, **including a foreign student**, who is attending a participating boarding school and wishes to apply for meal benefits, is not considered a household of one.
- The child's eligibility is determined based on the family's size and income.

Hot Topics

Foster Child Applications

- Foster application must be included in verification.
- If the foster child is certified from Dept. of Social Services Child Protection Services that is considered direct certification and is exempt from verification.
- Foster child is a child whose care and placement is the responsibility of a State or local welfare agency or who is placed by a court with a caretaker household. The State must retain legal custody of the child. This does not apply to adopted children or informal arrangements. (pg. 30, 43)

Hot Topics

LIMITED ENGLISH PROFICIENCY (LEP) (pg. 10)

- A limited ability to read, speak, write, or understand English. Recipients of Federal financial assistance have a responsibility to take reasonable steps to ensure meaningful access to their programs and activities by persons with limited English proficiency.
 - This FNS prototype household application package has been translated into 33 languages. Each translation includes:
 - Letter to household,
 - Application instructions,
 - Application form, and
 - A form to share information with MEDICAID or SCHIP for additional benefits.
- 11 • <http://www.fns.usda.gov/school-meals/applying-free-and-reduced-price-school-meals>

Hot Topics

Shared Custody Students (pg. 30)

- The parent that the child resides with during school time should apply.
- If the child splits their school time with both parents than either of the parents may apply, and the better benefits should be granted.
- Reminder: SFA staff cannot share application information to any adult that is not listed on the application. This includes custodial parents that did not submit the household application.

Hot Topics

iMATCH Directly Certified Students

- A child that shows up on your iMATCH direct certification system should be directly certified as SNAP or TANF.
- That certification supersedes (trumps) a household application.
- That household application may help you extend eligibility to household members. Do not throw it away! File it in an inactive or superseded by direct cert folder.

Hot Topics

Extending Eligibility for a Student that Moves Between Households

- The child with the SNAP, TANF, or FDPIR case number can extend their direct certification eligibility if that child moved from one household to another household.
- Movement by the other children that do not have a SNAP, TANF, or FDPIR case number cannot extend direct cert eligibility if they move to a different household.

Hot Topics

Other Source Categorically Eligible applications (pg. 39)

Migrant, Homeless, Runaway, Head Start

- The LEA must confirm the children's status with your schools homeless/migrant coordinator before benefits can be provided.
- If the LEA cannot confirm the children's status, the LEA must process the application using the income information provided.
- "Other Source Categorically Eligible" students cannot extend eligibility to other household members.

Hot Topics

Other Source Categorically Eligible applications (pg. 43, 50)

Foster children

- Granting free meals **does not require confirmation** of eligibility status prior to receiving benefits.
- “Other Source Categorically Eligible” students **cannot** extend eligibility to other household members.
- Can be included on their foster family application. The rest of the family must be determined as eligible based on other information provided on an application, for example income or a SNAP case number.

Hot Topics

- **Medicaid** is not an acceptable method of application or direct certification for free meal eligibility.
 - Medicaid and NSLP do not use the same federal poverty line determinations.

Flexibility of Start Date: Direct Certification

- **No Flexibility:** The effective date of free eligibility is the date the LEA accesses and processes the automated data matching file into the local point of service system.
- **With Flexibility:** The effective date of free eligibility use the date of the automated data matching file or benefit recipient file from another agency, which first identifies the child as eligible for direct certification.
- The fine print (PLE & Effective Date Checklist Item). My SFA will:
 - use this flexibility consistently for all DC methods
 - apply eligibility effective date consistently for all students
 - document the effective date used for lists, letters and iMATCH files
 - extended eligibility
 - refund any money paid by or on behalf of the student
 - claim meals or milk at the free reimbursement rate after the student is refunded

Flexibility of Start Date: Household Application

- **No Flexibility:** Children are eligible for free or reduced price benefits on the date their eligibility is determined and entered into the POS system.
- **With Flexibility:** The effective date of eligibility the date of submission of a complete household application.
- The fine print (PLE & Effective Date Checklist Item). My SFA will:
 - exercise this flexibility for all students
 - establish a method to document the date the application was submitted, such as a date stamp
 - refund any money paid by or on behalf of the student
 - claim those meals or milk at the free reimbursement rate after the student is refunded

Reminders

- **Colony Schools:**
 - Each household must apply for meal benefits. Colony students do not automatically receive free meal benefits. See USDA Memo SP 95-04 [found in the October Nutrition Bulletin](#) for more details
 - Colony household applications are included in the verification pool.
- **Gross income** should be included on household applications. See the Eligibility Manual for more details.

Free & Reduced Price Benefits Update SY2015-2016

Professional Standards Training Credit

This training credits for 30 minutes of training in **Key Area: Administration 3100: Free and Reduced Price Meal Benefits**



Questions for the Child and Adult Nutrition Services staff?



- Email questions to CANS:
DOE.SchoolLunch@state.sd.us
- Phone: 605-773-3413
- Fax: 605-773-6846