**FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED PRICE SCHOOL MEALS**

**Pitt County Schools School Nutrition Services**

**1717 West Fifth Street**

**Greenville, NC 27834**

**252-830-4226**

Dear Parent/Guardian:

Children need healthy meals to learn. **Pitt County Schools** offers healthy meals every school day. Breakfast costs **$1.00**; lunch costs **$2.35**. **Your children may qualify for free meals or for reduced price meals.** Reduced price is**$.00** for breakfast and **$.40**for lunch. When state funding is no longer available, the reduced breakfast charge will be **$.30**.This packet includes an application for free or reduced price meal benefits with instructions on the application. Below are some common questions and answers to help you with the application process.

1. **Who can get free OR REDUCED PRICE meals?**
   * All children in households receiving benefits from **Food and Nutrition Services (FNS, formerly known as Food Stamps), the Food Distribution Program on Indian Reservations (FDPIR) or Work First Cash Assistance (formerly Temporary Assistance for Needy Families or TANF)**, are eligible for free meals.
   * Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals.
   * Children participating in their school’s Federally-funded Head Start program are eligible for free meals.
   * Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
   * Children may receive free or reduced price meals if your household’s income is within the limits on the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced price meals if your household income falls at or below the limits on this chart.

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| --- | --- | --- | --- | --- | --- |
| **FEDERAL INCOME CHART**  Effective For School Year July 1, 2021 - June 30, 2022 | | | | | |
| Household size | Annual | Monthly | Twice Per Month | Every Two Weeks | Weekly |
| 1 | **23,828** | **1,986** | **993** | **917** | **459** |
| 2 | **32,227** | **2,686** | **1,343** | **1,240** | **620** |
| 3 | **40,626** | **3,386** | **1,693** | **1,563** | **782** |
| 4 | **49,025** | **4,086** | **2,043** | **1,886** | **943** |
| 5 | **57,424** | **4,786** | **2,393** | **2,209** | **1,105** |
| 6 | **65,823** | **5,486** | **2,743** | **2,532** | **1,266** |
| 7 | **74,222** | **6,186** | **3,093** | **2,855** | **1,428** |
| 8 | **82,621** | **6,886** | **3,443** | **3,178** | **1,589** |
| Each additional person | **8,399** | **700** | **350** | **324** | **162** |

1. **HOW DO I KNOW IF MY CHILDREN QUALIFY AS homeless, MIGRANT, OR RUNAWAY?** Do the members of your household lack a permanent address? Are you staying together in a shelter, hotel, or other temporary housing arrangement? Does your family relocate on a seasonal basis? Are any children living with you who have chosen to leave their prior family or household? If you believe children in your household meet these descriptions and haven’t been told your children will get free meals, please call or e-mail **Kim Anderson at 252-695-7967 or andersk@pitt.k12.nc.us.**
2. **Do I need to fill out an application for each child?** No. *Use* *one Free and Reduced Price School Meals Application for all students in your household.* We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to: **Pitt County Schools School Nutrition Services, 1717 West Fifth Street, Greenville, NC 27834, 252-830-4226**.
3. **SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE MEALS?** No, but please read the letter you got carefully and follow the instructions. If any children in your household were missing from your eligibility notification, contact **Pitt County Schools School Nutrition Services, 1717 West Fifth Street, Greenville, NC 27834, 252-830-4226, or email us at snutrition@pitt.k12.nc.us** immediately.
4. **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 that school year and for the first few days of this school year. You must send in a new application unless you received an approval letter from School Nutrition Services stating that your child is eligible for the new school year. If you do not send in a new application that is approved by the school or you have not been notified that your child is eligible for free meals, your child will be charged the full price for meals.
5. **I GET WIC. CAN MY CHILDREN GET FREE MEALS?** Children in households participating in WIC may be eligible for free or reduced price meals. Please send in an application.
6. **Will the information I give be checked?** Yes. We may also ask you to send written proof of the household income you report.
7. **If I don’t 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.
8. **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: **Debra Baggett, 1717 West Fifth Street, Greenville, NC 27834, 252-830-4200, dbaggett@pitt.k12.nc.us***.*
9. **May I apply if someone in my household is not a U.S. citizen?** Yes. You, your children, or other household members do not have to be U.S. citizens to apply for free or reduced price meals.
10. **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.
11. **WHAT IF SOME HOUSEHOLD MEMBERS HAVE NO INCOME TO REPORT?** Household members may not receive some types of income we ask you to report on the application, or may not receive income at all. Whenever this happens, please write 0 in the field. However, if any income fields are left empty or blank, those will also be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you meant to do so.
12. **We are in the military. do we REPORT OUR INCOME DIFFERENTLY?** Your basic pay and cash bonuses must be reported as income. Ifyou get any cash value allowances for off-base housing, food, or clothing, it must also be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. Any additional combat pay resulting from deployment is also excluded from income.
13. **WHAT IF THERE ISN’T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY?** List any additional household members on a separate piece of paper, and attach it to your application. Contact **Pitt County Schools School Nutrition Services, 1717 West Fifth Street, Greenville, NC 27834, 252-830-4226, or email us at** [**snutrition@pitt.k12.nc.us**](mailto:snutrition@pitt.k12.nc.us)to receive a second application.
14. **My family needs more help. Are there other programs we might apply for?** To find out how to apply for **Food and Nutrition Services (FNS, formerly Food Stamps)** or other assistance benefits, contact your local assistance office or call **The Careline at** **1-800-662-7030**.

If you have other questions or need help, call **252-830-4226***.*

Sincerely,

**Gretchen Wilson, SNS**

**Director of School Nutrition Services**

**INSTRUCTIONS FOR APPLYING**

**A household member is any child or adult living with you.**

**IF YOUR HOUSEHOLD RECEIVES BENEFITS FROM FNS (FORMERLY FOOD STAMPS), WORK FIRST CASH ASSISTANCE (WF) or the Food distribution program on indian reservations (FDPIR), FOLLOW THESE INSTRUCTIONS:**

Part 1: List all children attending a Pitt County School and the name of each child’s school, grade and birth date.

Part 2: List the case number for any household member (including adults) receiving FNS (FORMERLY FOOD STAMPS), Work First Cash Assistance, or FDPIR benefits.

Part 3: Skip this part.

Part 4: Sign the form. The last four digits of a Social Security Number are **not** necessary.

Part 5: Answer this question if you choose.

**Turn the completed application in to the School Nutrition Manager at your youngest child’s school or mail to: Pitt County Schools Attn: School Nutrition Services, 1717 West Fifth Street, Greenville, NC 27834.**

**if no one in your household gets FNS (FORMERLY FOOD STAMPS), WORK FIRST CASH ASSISTANCE OR FDPIR benefits and if any child in your household is homeless, a migrant or runaway follow these instructions:**

Part 1: List all children attending a Pitt County School and the name of each child’s school, grade and birth date. If any child you are applying for is homeless, migrant or a runaway circle the appropriate letter (**H**-Homeless, **M**-Migrant or **R**-Runaway) and call Kim Anderson at (252) 695-7967.

Part 2: Skip this part.

Part 3: Complete only if a child in your household isn’t eligible under Part 1 (Homeless, Migrant or Runaway). See instructions for All Other Households.

Part 4: Sign the form. The last four digits of a Social Security Number are **not** necessary if you didn’t need to complete Part 3.

Part 5: Answer this question if you choose.

**Turn the completed application in to the School Nutrition Manager at your youngest child’s school or mail to: Pitt County Schools Attn: School Nutrition Services, 1717 West Fifth Street, Greenville, NC 27834.**

**If you are applying for a FOSTER CHILD, follow these instructions:**

If **all** children in the household are foster children:

Part 1: List all foster children, the school name, grade and birth date for each child. Circle the letter **F** indicating the child is a Foster child.

Part 2: Skip this part.

Part 3: Skip this part.

Part 4: Sign the form. The last four digits of a Social Security Number are **not** necessary.

Part 5: Answer this question if you choose.

**Turn the completed application in to the School Nutrition Manager at your youngest child’s school or mail to: Pitt County Schools Attn: School Nutrition Services, 1717 West Fifth Street, Greenville, NC 27834.**

If **some** of the children in the household are foster children:

Part 1: List all household members, the name of each child’s school, grade and birth date. Circle the letter **F** for each foster child. If any child you are applying for is homeless (H), migrant (M), or a runaway (R) circle the appropriate letter (**H, M** or **R**) and if you have questions call Kim Anderson at (252) 695-7967.

Part 2: Skip this part.

Part 3: List all income on the same line as the person who receives it. Indicate how often it is received. Record each income only once. For each household member with no income, please put “0” in the field. See instructions for All Other Households.

Part 4: Adult household member must sign the form and list the last four digits of their Social Security Number (or mark the box if s/he doesn’t have one).

Part 5: Answer this question if you choose.

**Turn the completed application in to the School Nutrition Manager at your youngest child’s school or mail to: Pitt County Schools Attn: School Nutrition Services, 1717 West Fifth Street, Greenville, NC 27834.**

**ALL OTHER HOUSEHOLDS, including WIC households, follow these instructions:**

Part 1: List all household members, the name of each child’s school, grade and birth date. If any child you are applying for is homeless (H), migrant (M), a runaway (R) or foster (F) circle the appropriate letter (**H, M**, **R or F**) and if you have questions call Kim Anderson at (252) 695-7967.

Part 2: Skip this part.

Part 3: List all income on the same line as the person who receives it. Indicate how often it is received. Record each income only once. Follow these instructions to report total household income from this month or last month.

* List all other adults and children in the household with income or no income.
  + **NO INCOME:** If there is a household member that does not receive income, please put “0” in the field.
  + **Gross Income and How Often It Was Received**: For each household member list each type of income received for the month. You must tell us how often the money is received—weekly, monthly, biweekly, bimonthly, or annually.
  + **Earnings:** Be sure to list the **gross income**, not the take-home pay. Gross income is the amount earned *before* taxes and other deductions. You should be able to find it on your pay stub or your boss can tell you.
  + **Income received from welfare, child support, and alimony**: List the amount each person received.
  + **Income received from retirement benefits, Social Security, Supplemental Security Income (SSI), Veteran’s benefits (VA benefits), and disability benefits:** List the amount each person received.
  + **All Other Income:** List Worker’s Compensation, unemployment or strike benefits, regular contributions from people who do not live in your household, and any other income. Do not include benefits from WIC, Federal education and foster payments received by the family from the placing agency. For ONLY the self-employed, under *Earnings from Work*, report income after expenses. This is for your business, farm, or rental property. If you are in the Military Privatized Housing Initiative or get combat pay, do not include these allowances as income.

Part 4: Adult household member must sign the form and list the last four digits of their Social Security Number (or mark the box if s/he doesn’t have one).

Part 5: Answer this question if you choose.

**Turn the completed application in to the School Nutrition Manager at your youngest child’s school or mail to: Pitt County Schools Attn: School Nutrition Services, 1717 West Fifth Street, Greenville, NC 27834.**

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 child 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.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) found online at: [How to File a Complaint](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

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