

Name: _____ Grade: _____
 ID# _____ Sch _____
 Birthdate: _____

2022-2023 ESUHSD Application for Free and Reduced Status - Complete one application per household. Mail the completed application to ESUHSD-CNS, 830 N. Capitol Av, San Jose CA 95133 Read the instructions included with the application on How to Apply. Print clearly with a pen. California Education Code Section 49557(a): Applications for free and reduced status may be submitted at any time during a school day. Children participating in the federal National School Lunch Program will not be overtly identified by the use of special tokens, special tickets, special serving lines, separate entrances, separate dining areas, or by any other means.” Direct questions to Child Nutrition Services – 408-347-5191. This institution is an equal opportunity provider.

STEP 1—STUDENT INFORMATION—Children in Foster Care and children who meet the definition of Homeless, Migrant, or Runaway are eligible for free status. If there are more household members than the number of lines on the application, attach a second application. Check the application box if the student is

Print the name of ALL Children
(First, Middle Initial, Last)

Enter School Name or
Student ID Number (if any)

foster child, Homeless, Migrant, Runaway

	Grade	Foster	Homeless	Migrant	Runaway

STEP 2 – ASSISTANCE PROGRAMS: CalFresh, CalWORKs, or FDPIR Do ANY household members (child or adult) currently participate in CalFresh, CalWORKS, or FDPIR? If NO, skip STEP 2 and continue to STEP 3.

If YES, check the applicable program box, enter one case number, skip STEP 3 and continue to STEP 4.

CalFresh CalWorks FDPIR Enter Case Number (NOT EBT card number) _____

STEP 3 – REPORT INCOME FOR ALL HOUSEHOLD MEMBERS (Skip this step if you answered ‘Yes’ to STEP 2

Enter the TOTAL GROSS income (before deductions) in whole dollars earned. Enter the appropriate pay period in the “How Often” box: W= Weekly, 2W= Bi-Weekly, 2M= Twice a Month (every 15 days), M= Monthly, Y= Yearly

A. STUDENT INCOME: Total Student Income earned by ALL students in the household in STEP 1.: _____ Paid How Often: _____

B. ALL OTHER INCOME:

Print the name(s) of ALL OTHER Household Members not listed in Step 1-include yourself	Earnings from work	How Often?	Public Assistance/SSI Child Support/Alimony	How Often?	Pensions Retirement/ All Other Income	How Often?
	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	

DO NOT COMPLETE – SCHOOL USE ONLY

How Often: _____ Weekly _____ Bi-Weekly _____ Twice a Month _____ Monthly _____ Yearly _____
 Total Household Income: \$ _____ Total Household Size: _____ Categorical: _____ Error Prone: _____
 Eligibility Status: _____ Free _____ Reduced _____ Denied _____
 Verified as: _____ Homeless _____ Migrant _____ Runaway _____
 Determining Official Signature: _____ Date: _____
 Confirming Official Signature: _____ Date: _____
 Verifying Official Signature: _____ Date: _____

STEP 4 – REQUIRED - CONTACT INFORMATION & ADULT SIGNATURE

Print Name: _____ Today's Date: _____

Address: _____ Phone Number: _____

City: _____ State: _____ Zip: _____ Email: _____

SIGNATURE: _____ Last 4 digits of SSN: _____

Don't forget

Check if no SSN

OPTIONAL – CHILDREN'S ETHNIC AND RACIAL IDENTITIES

We are required to ask for information about your children's race and ethnicity. This information is important and helps to make sure we are fully serving our community. Responding to this section is optional and does not affect your children's eligibility for free or reduced-price meals.

Ethnicity (check one):

Hispanic or Latino Not Hispanic or Latino

Race (check one or more):

American Indian or Alaskan Native Asian Black or African American
 Native Hawaiian or other Pacific Islander White



Dear Parent or Guardian:

East Side Union High SD participates in the National School Lunch Program and School Breakfast Program by offering nutritious meals every school day. Beginning this school year California Universal Meals will allow all students at all schools a free breakfast and lunch every school day without having to fill out a meal application. It is highly encouraged to complete this form as it provides additional benefits to you and the district such as grants, program funding, athletic waivers, discounts on AP testing fee, and internet discounts, among others. You or your children do not have to be U.S. citizens to qualify for these benefits. If there are more household members than the number of lines on the application, attach a second application. For additional assistance, please call 408 347 5191.

LETTER TO HOUSEHOLD FOR FREE AND REDUCED-PRICE MEALS

QUALIFICATION: Your children may qualify for free or reduced status if your household income falls at or below the federal Income Eligibility Guidelines below.

Income Eligibility Guidelines
July 1, 2022–June 30, 2023

Table with 6 columns: Household Size, Year, Month, Twice Per Month, Every Two Weeks, Week. Rows 1-8 and a summary row for additional family members.

APPLYING FOR BENEFITS: An application for free or reduced status cannot be reviewed unless all required fields are completed. A household may apply at any time during the school year. If you are not eligible now, but your household income decreases, household size increases, or a household member becomes eligible for CalFresh, California Work Opportunity and Responsibility to Kids (CalWORKs), or Food Distribution Program on Indian Reservations (FDPIR) benefits, you may submit an application at that time.

DIRECT CERTIFICATION: An application is not required if the household receives a notification letter indicating all children are automatically certified for free status. If you did not receive a letter, please complete an application.

VERIFICATION: School officials may check the information on the application at any time during the school year. You may be asked to submit information to validate your income or current eligibility for CalFresh, Cal-WORKs, or FDPIR benefits.

WIC PARTICIPANTS: Households that receive Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) benefits, may be eligible for free or reduced status by completing an application.

HOMELESS, MIGRANT, RUNAWAY & HEAD START: Children who meet the definition of homeless, migrant, or runaway, and children participating in their school's Head Start program are eligible for free meals. Please contact Child Nutrition Services at 408 347 5191

FOSTER CHILD: The legal responsibility must be through a foster care agency or court to qualify for free meals. A foster child may be included as a household member if the foster family chooses to apply for their non-foster children on the same application and must report any personal income earned by the foster child. If the non-foster children are not eligible, this does not prevent a foster child from receiving free status.

FAIR HEARING: If you do not agree with the decision regarding your application's determination or the result of verification, you may discuss it with the hearing official. You also have the right to a fair hearing, which may be requested by calling or writing to the following: Associate Superintendent of Business, ESUHS, 830 N. Capitol Ave., San Jose, CA 95133—408 347 5051.

ELIGIBILITY CARRYOVER: Your child's eligibility status from the previous school year will continue into the new school year for up to 30 operating days or until a new determination is made. When the carryover period ends, your child will go to paid status, unless the household fills out a current year application and receives a notification letter for free or reduced status.

School officials are not required to send reminder or expired eligibility notices.

This institution is an equal opportunity provider.

HOW TO APPLY FOR FREE OR REDUCED- STATUS – Complete one application per household. Please print clearly with a pen. Incomplete, illegible, or incorrect information will delay processing.

STEP 1: STUDENT INFORMATION—Include ALL STUDENTS who attend ESUHS and ALL their siblings. Print their name (first, middle initial, last), school, and grade level. If any student listed is a foster child, check the "Foster" box. If you are only applying for a foster child, complete STEP 1, and then continue to STEP 4. If any student listed may be homeless, migrant, or runaway, check the applicable "Homeless, Migrant, or Runaway" box and complete all STEPS of the application.

STEP 2: ASSISTANCE PROGRAMS—If ANY household member (child or adult) participates in CalFresh, CalWORKs, or FDPIR, then all children are eligible for free meals. Must check the applicable assistance program box, enter one case number, and then continue to STEP 4. If no one participates, skip STEP 2 and continue to STEP 3.

STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS—Must report GROSS income (before deductions) from ALL household members (children and adults) in whole dollars. Enter "0" for any household member that does not receive income.

- A. Report the combined GROSS income for all students listed in STEP 1 and enter the appropriate pay period. Include a foster child's income if you are applying for foster and non-foster children on the same application.
B. Print the names (first and last) of ALL OTHER household members not listed in STEP 1, including yourself. Report the total GROSS income from each source and enter the appropriate pay period.
C. Enter the last four digits of your Social Security number (SSN). If no adult household member has a SSN, check the "NO SSN" box.

STEP 4: CONTACT INFORMATION & ADULT SIGNATURE —The application must be signed by an adult household member. Person signing the application must be listed in Step 3. Print the name of the adult signing the application, include contact information, and today's date. It is VERY helpful if you include your email address.

OPTIONAL: CHILDREN'S ETHNIC AND RACIAL IDENTITIES – This field is optional to complete and does not affect your children's eligibility for free or reduced status. Please check the appropriate boxes.

INFORMATION STATEMENT: 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 status. You must include the last four digits of the social security number of the primary wage earner or other adult household member. The last four digits of the social security number are not required when you list a CalFresh, CalWORKs, or 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 status, and for administration and enforcement of the lunch and breakfast programs.

QUESTIONS/NEED ASSISTANCE: Please contact Child Nutrition Services at CNS@esuhsd.org or call 408 347 5191.

SUBMIT: Please submit a complete application to CNS-ESUHS, 830 N. Capitol Av., San Jose, CA 95133 or your school cafeteria. You will be notified if your application is approved or denied for free or reduced status.

Sincerely,

Julie Kasberger, ESUHS Director of General Services