# Notice of Approval/Denial for All Students

**[Date]**

**[Child(ren)’s Name(s)]**

**[School(s)]**

**[Parent’s Name and Address]**

Dear Parent//Guardian:

Based on your application or other supporting documentation received by our office, your child/children have been:

\_\_\_\_\_ Approved for free meals based on:

 Household Meal Application *or*

 Direct Certifi­­cation – based on the following qualifying program:

 SNAP  TANF  Foster  FDPIR  Migrant  Homeless  Medicaid-Free

If directly certified, no further application is necessary.

\_\_\_\_\_ Approved for reduced-price meals at $0.40 for lunch and $0.30 for breakfast based on:

 Household Meal Application *or*

 Direct Certification – based on the following qualifying program:

|  |
| --- |
|  Medicaid – Reduced |

If directly certified, no further application is necessary. However, if you think your household may qualify for free meals based on household size and income, you may complete a meal application.

\_\_\_\_\_ Denied for the following reasons:

\_\_\_\_\_ Income over the allowable amount.

\_\_\_\_\_ Incomplete application. Complete the following information:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please contact your school in the following situations:

* If there are other school-aged children in your household who are not listed above and you would like them to receive meal benefits
* You do not want your child/children to receive meal benefits
* You have additional question­­­

If you do not agree with this decision, you may discuss it with the district's hearing official. You also have a right to a fair hearing. To request a fair hearing, call or write the following official:

**[Name and Title]**

**[Address]**

**[Phone]**

Once approved, your children are eligible for free or reduced-price meals for the remainder of the school year. You may reapply for benefits at any time during the school year. If you are not eligible now but have a decrease in household income, become unemployed, have an increase in household size or qualify for SNAP, TANF or FDPIR you may fill out another application at that time.

Sincerely,

**Non-Discrimination Statement**: This explains what to do if you believe you have been treated unfairly.

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA’s TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant’s name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. Mail: U.S. Department of Agriculture

Office of the Assistant Secretary for Civil Rights

1400 Independence Avenue, SW

Washington, D.C. 20250-9410

1. Fax: (833) 256-1665 or (202) 690-7442; or
2. Email: program.intake@usda.gov

This institution is an equal opportunity provider.