2017-2018 Utah Household Application for Free and Reduced Price School Meals

Apply online at www.canvonrimacademv.org

Complete one applicat	tion per household. Please use a pen (not a pencil).				www.carryormmacademy.org
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 First Name	MI	Child's Last Name			Grade Student? Yes No Child Migrant, Runaway
0777	Household Members (including you) curre	ently participate in o	one or more of the fo	ollowing assistance program	ns: SNAP, TANF, or FDPIR?	
STEP 3 Report In	If NO > Go to STEP 3. If YI			STEP 4 (Do not complete ST	Case Number:	Write only one case number in this space.
Are you unsure what income to include here?	A. Child Income Sometimes children in the household earn or a Household Members listed in STEP 1 here. B. All Adult Household Members (included List all Household Members not listed in STEF for each source in whole dollars (no cents) only	uding yourself) 2 1 (including yourself)	even if they do not rece e income from any source	ive income. For each Household	Member listed, if they do receive any fields blank, you are certify	Bi-Weekly 2x Month Monthly income, report total gross income (before taxes) ying (promising) that there is no income to report.
Flip the page and review the charts titled "Sources of Income" for more	Name of Adult Household Members (First and Last)	Earnings from Work	How often? Weekly Bi-Weekly 2x Month		How often? Weekly Bi-Weekly 2x Month Monthly	Pensions/Retirement/ All Other Income
information. The "Sources of Income		\$	0 0 0	\$		
for Children" chart will help you with the Child Income section.		\$	0 0 0	\$	0 0 0 0	\$ 0 0 0 0
The "Sources of Income for Adults" chart will help		\$	0 0 0	\$	0 0 0 0	\$ 0 0 0 0
you with the All Adult Household Members section.		\$	0 0 0	S	0 0 0 0	\$ 0000
	Total Household Members (Children and Adults)	-	ocial Security Number (Ser or Other Adult Househo	· V V V	x x	Check if no SSN
certify (promise) that all informat	information and adult signature. Mail Continuous and that all income is report y lose meal benefits, and I may be prosecuted under application.	ed. I understand that this	information is given in conn			heck) the information. I am aware that if I purposely give
Street Address (if available)	Ant #	City		State Zip	Daytime Phone and	Email (ontional)
. ,	Apt#	City		State Zip	Today's date	Errai (opuoria)
Printed name of adult signing the form		Signature of ad	Signature of adult			

Sources of Income for Children					
Sources of Child Income	Example(s)				
- Earnings from work	- A child has a regular full or part-time job where they earn a salary or wages				
Social SecurityDisability PaymentsSurvivor's Benefits	 - A child is blind or disabled and receives Social Security benefits - A Parent is disabled, retired, or deceased, and their child receives Social Security benefits 				
-Income from person outside the household	- A friend or extended family member regularly gives a child spending money				
-Income from any other source	- A child receives regular income from a private pension fund, annuity, or trust				

Date

Determining Official's Signature

Sources of Income for Adults								
Earnings from Work	Public Assistance / Alimony / Child Support	Pensions / Retirement / All Other Income						
- Salary, wages, cash bonuses - Net income from self- employment (farm or business)	Unemployment benefits Worker's compensation Supplemental Security Income (SSI) Cash assistance from State or local	Social Security (including railroad retirement and black lung benefits) Private pensions or disability benefits						
If you are in the U.S. Military: - Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances) - Allowances for off-base bousing food and dothing	government - Alimony payments - Child support payments - Veteran's benefits - Strike benefits	Regular income from trusts or estates Annuities Investment income Earned interest Rental income Regular cash payments from outside household						

Verifying Official's Signature

Date

		Housing, rood and dott ing	
OPTIONAL Children's Racial and Ethnic I	dentities		
Responding to this section is optional and doe Ethnicity (check one): Hispanic or Latino	Not Hispanic or Latino an or Alaskan Native Asian B dires the information on this application. You do not approve your child for free or reduced price drity number of the adult household member who ty number is not required when you apply on Assistance Program (SNAP), Temporary istribution Program on Indian Reservations ild or when you indicate that the adult household durity number. We will use your information to neals, and for administration and enforcement of gibility information with education, health, and the benefits for their programs, auditors for m look into violations of program rules. The service of the program of the program is a service of the progra	Persons with disabilities who require large print, audiotape, American Sigapplied for benefits. Individuals who through the Federal Relay Service available in languages other than En To file a program complaint of dis Form, (AD-3027) found online at: htt office, or write a letter addressed to form. To request a copy of the compusible	scrimination, complete the USDA Program Discrimination Complaint tp://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA USDA and provide in the letter all of the information requested in the plaint form, call (866) 632-9992. Submit your completed form or letter to riculture Secretary for Civil Rights enue, SW i0-9410
Do not fill out For School Use Only			
Annual Income Conversion: Weekly x 52, Ever	ry 2 Weeks x 26, Twice a Month x 24 Month How often?	ıly x 12	Eligibility: Free Reduced Denied
0	Cate	egorical Eligibility	0 0 0

Confirming Official's Signature

Date