

SCHOOLFOOD TRAINING

SCHOOL MEALS APPLICATION AND STUDENT ELIGIBILITY

AUGUST 2010

SCHOOL MEALS APPLICATION AND STUDENT ELIGIBILITY

TOPICS

SCHOOL MEALS APPLICATION

NON SCANNING SCHOOLS

ONLINE APPLICATION PROCESS

FORMER USM SCHOOLS

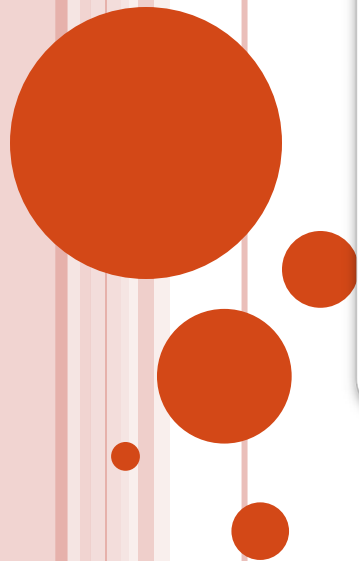
APPLICATION SCANNING SCHOOLS

STUDENT ELIGIBILITY FOR MEALS

TITLE 1 ELIGIBILITY

SCHOOLFOOD CONTACT INFORMATION

SCHOOL MEALS APPLICATION



The School Meals Application

- ❑ Establishes student eligibility for meals
 - *Free, Reduced and Full-Price (Paid)*
- ❑ Establishes poverty counts for schools
 - *Title 1, SES, E-Rate, Student Fair Funding*
- ❑ Determines after school snack and supper program categories
 - *“At Risk” or “Not At Risk”*

- Eligibility categories are used for Breakfast, Lunch, Snack and Supper programs**
- School Meals Application is also known as**
 - Application for Free and Reduced-Price Meals**
 - Official Name*
 - Lunch Form**
 - Common Name for households*
 - 1041 Form**
 - Common Name for schools*

2010-2011 SCHOOL MEALS APPLICATION

New York City Department of Education 2010-2011 Application for Free and Reduced-Price Meals

F R D

USE BLACK INK, PRINT NEATLY, COMPLETE ONE APPLICATION FOR ALL CHILDREN ATTENDING THE SAME SCHOOL. RETURN APPLICATION TO YOUR CHILD'S SCHOOL.

I DO NOT QUALIFY FOR FREE OR REDUCED-PRICE MEALS. Complete Part 2 and School Information. Sign and date form, then return to school.

1 HOUSEHOLDS WITH FOSTER CHILDREN: You must complete a separate application for each foster child. Check box if this application is for a foster child

List the child's monthly personal use income. Write "0" if the child does not receive personal use income. \$ / Monthly

2 LIST ONLY THE CHILDREN ATTENDING THIS SCHOOL → Enter School Information

	*Birthdate	Print Legal Name of students Attending This School (*Optional Information)	*Gender	*Grade	*Osis # (Student ID Number)
	MM DD YY	Frist Name MI Last Name			
1	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

School Name

School#

Check Box for School Borough M BX Q BK SI

3 Write the SNAP (Foodstamp) or TANF case number as shown on your benefit letter. Do not use number on your benefit card. Sign the application in Part 5. You must complete a separate application for children with a different case number or no case number.

SNAP (Foodstamp) Case #

TANF/FDPIR Case #

4 LIST THE NAMES OF ALL OTHER MEMBERS IN YOUR HOUSEHOLD. DO NOT INCLUDE CHILDREN ALREADY LISTED IN PART 2.

LIST ALL CURRENT INCOME AND PAY PERIOD
Current income is your income at the present time before taxes and other deductions. If pay period is not noted, the reported income will be processed as WEEKLY. Use these letters to indicate how often income is received. W=Weekly; B=Bi-Weekly; M=Monthly; T=Twice a month; Y=Yearly

PRINT FIRST AND LAST NAME	Gross Earnings from Work (Before Deductions): ALL JOBS	How Often?	Child Support/Alimony Payments	How Often?	Pay from Pension, Retirement (Social Security)	How Often?	Any Other Income	How Often?
1	\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>	
2	\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>	
3	\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>	
4	\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>	
5	\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>	
6	\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>	
7	\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>		\$ <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>	

TOTAL HOUSEHOLD MEMBERS. Add the names listed in Parts 2 and 4 (enter 1 if Foster Child) →

SIGNATURE: An adult household member **MUST** sign the application before it can be approved. I certify that all of the information is true and that all income is reported. I understand that the information is being given for the school to receive federal funds; that school officials may verify the information and that deliberate misrepresentation of the information may subject me to prosecution under applicable state and federal laws, and my children may lose meal benefits.

Signature of adult household member completing this form

Print name of adult household member completing this form

Today's Date MM/DD/YY / /

Adult Household Member Social Security # - -

If you do not have a Social Security Number you must write the word "NONE" →

Address Apt# City Zip

Best Time To Call: 8 am - 11 am 11 am - 2 am 2 pm - 5 am 5 am - 8 am

Home Phone ()

Daytime Phone ()

Cell Phone ()

2010-2011 SCHOOL MEALS APPLICATION SAMPLE

I DO NOT QUALIFY FOR FREE OR REDUCED-PRICE MEALS. Check this box if your income does not qualify you for free or reduced-price meals. Complete PART 2 and School Information section. Sign and date application in PART 5.

USE BLACK INK ONLY TO COMPLETE THE ENTIRE FORM.
COMPLETE FORM IN ENGLISH.
USE THE COLORED BOXES AND ARROWS IN THE SAMPLE BELOW TO HELP YOU.
COMPLETE ONLY THE AREAS THAT APPLY TO YOUR HOUSEHOLD.

New York City Department of Education 2010-2011 Application for Free and Reduced-Price Meals

PART 1 – FOSTER CHILDREN: Check the box if you have a foster child and complete a separate application for each child. Enter personal use income or "0" if the child does not receive any.

I DO NOT QUALIFY FOR FREE OR REDUCED-PRICE MEALS. Complete Part 2 and School Information. Sign and date form, then return to school.

HOUSEHOLDS WITH FOSTER CHILDREN: You must complete a separate application for each foster child. Check box if this application is for a foster child List the child's monthly personal use income. Write "0" if the child does not receive personal use income. \$ 120 / Monthly

PART 2 – CHILDREN ATTENDING THIS SCHOOL: Write each child's legal name attending this school, date of birth, gender and grade. Include student ID (OSIS) number if known. If you have foster children – write only one child's name and then go to PART 5 to sign and date form. Complete a separate application for each foster child.

LIST ONLY THE CHILDREN ATTENDING THIS SCHOOL									
MM	DD	YY	First Name	MI	Last Name	Gender	Grade	OSIS # (Student ID Number)	
03	03	97	FIRST		STUDENT	M	07	123456789	
10	15	98	SECOND		STUDENT	F	06	123456789	
08	27	99	THIRD		STUDENT	M	05	123456789	
08	27	99	FOURTH		STUDENT	F	05	123456789	

Enter School Information

School Name: MS 20Q
School#: 0 2 0
Check Box for School Borough: M BX Q BK SI

Write the SNAP (Foodstamp) or TANF case number as shown on your benefit letter. Do not use number on your benefit card. Sign the application for Part 2. You must complete a separate application for children with a different case number or no case number. SNAP (Foodstamp) Case #: 123456789A
TANF/TAN Case #: 123456789Z

SCHOOL INFORMATION
Write your child's school name or number. Indicate borough where school is located:
M = Manhattan
BX = Bronx
Q = Queens
BK = Brooklyn
SI = Staten Island

PART 4 – OTHER MEMBERS LIVING IN HOUSEHOLD: Write the names of everyone living in the household except foster children or any children already listed in PART 2.

LIST ALL CURRENT INCOME AND PAY PERIOD
Current Income is your income at the present time before taxes and other deductions. If pay period is not noted, the reported income will be processed as WEEKLY. Use these letters to indicate how often income is received. W=Weekly; B=Bi-Weekly; M=Monthly; T=Twice a month; Y=Yearly

PRINT FIRST AND LAST NAME	Gross Earnings from Work (Before Deductions) ALL JOBS	Now Other?	Child Support/Alimony Payments	Now Other?	Pay from Pension, Retirement (Social Security)	Now Other?	Any Other Income
1 Adult 1	\$ <u>2550.45</u> / <u>W</u>		\$ /		\$ /		\$ /
2 Adult 2	\$ <u>275.30</u> / <u>W</u>		\$ /		\$ /		\$ /
3 Brother / Sister 1	\$ <u>400.00</u> / <u>T</u>		\$ <u>300.00</u> / <u>B</u>		\$ /		\$ /
4 Brother / Sister 2	\$ /		\$ <u>0.00</u> /		\$ <u>0.00</u> /		\$ <u>0.00</u> /
5 Additional Person(s) 1	\$ /		\$ /		\$ <u>400.00</u> / <u>M</u>		\$ /
6	\$ /		\$ /		\$ /		\$ /
7	\$ /		\$ /		\$ /		\$ /

PART 3: SNAP (Foodstamp) / TANF CASE NUMBER
Write your SNAP (Foodstamp) or TANF case number from your benefit letter – do not write income.

PART 4 – TOTAL HOUSEHOLD MEMBERS: Add the number of children listed in PART 2 and the number of members listed in PART 4 and write the total in this box.

TOTAL HOUSEHOLD MEMBERS. Add the names listed in Parts 2 and 4 (enter 1 if Foster Child) 09

SIGNATURE: An adult household member MUST sign the application before it can be approved. I certify that all of the information is true and that all income is reported. I understand that the information is being given for the school to receive federal funds; that school officials may verify the information and that deliberate misrepresentation of the information may subject me to prosecution under applicable state and federal laws, and my children may lose meal benefits.

PART 5 – SIGNATURE: An adult household member 21 years or older must sign the application before it can be approved. An emancipated child must sign his or her own application.

Adult Household Member
Signature of adult household member completing this form

Adult Household Member
Print name of adult household member completing this form

Today's Date MM DD YY 03/03/97 Adult Household Member Social Security # 123-45-6789 If you do not have a Social Security Number you must write the word "NONE" NONE

100 Name Street A1 Brough City, NY 11111
Address Apt# City Zip

718 565-1234 Home Phone
718 556-9000 Daytime Phone
347 567-5678 Cell Phone

Best Time To Call:
 8 am - 11 am
 11 am - 2 pm
 2 pm - 5 pm
 5 pm - 8 pm

ADDRESS AND PHONE NUMBER: Write your current address and phone numbers where you can be reached if necessary. Check the box to tell us the best time to call.

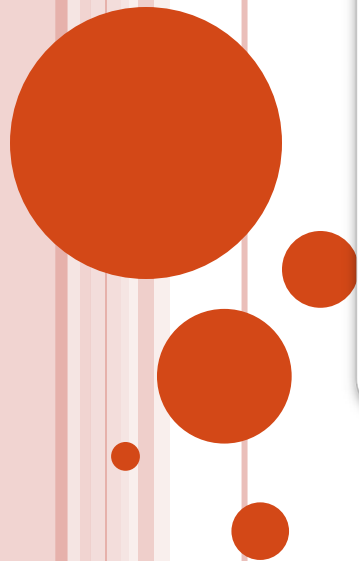
YOUR CHILD'S MEAL STATUS WILL BE AFFECTED IF REQUIRED INFORMATION IS MISSING AND APPLICATIONS RECEIVED WITHOUT SIGNATURES WILL NOT BE PROCESSED.

FOR ASSISTANCE OR QUESTIONS ON COMPLETING THIS APPLICATION YOU SHOULD CONTACT:
SCHOOLFOOD HELP DESK AT (718) 707-4400 OR SEND EMAIL TO OSFCOMPLIANCE@SCHOOLS.NYC.GOV

- Participating schools in DOE foodservice program – go to SchoolFood website: <http://schools.nyc.gov/schoolfood>**
- Application distribution and collection**
- Paper and electronic versions**
- Parents/guardians can apply online at ACCESS NYC website: www.nyc.gov/accessnyc**
- Paper applications delivery to schools**

- Schools sends paper applications home**
- Households complete and return applications**
- Schools process applications or send to SchoolFood**
- Eligibility codes entered in student database**
 - **ATS** (public and charter schools)
 - **NPSIS** (non-public schools)
- Eligibility codes used for foodservice and Title I funding**

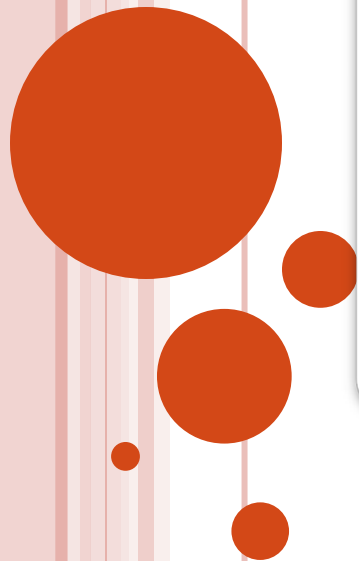
NON SCANNING SCHOOLS



Non -scanning schools will

- Go to SchoolFood website for school level tutorial:
<http://schools.nyc.gov/schoolfood>
- Process paper **School Meals Applications** at school level within 10 days of receipt
- Use current year instructions and federal income scale
- Enter meal codes in **ATS** and send meal status letters home to parents/guardians
- Contact SchoolFood Help Desk for technical assistance – (718) 707-4400

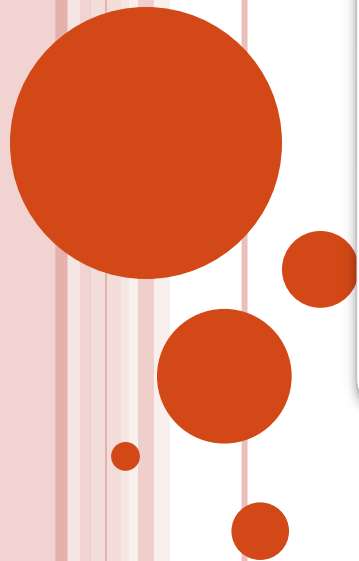
ONLINE APPLICATION PROCESS



Households

- Complete one application for all children
- Receive confirmation number from ACCESS NYC
- Contact SchoolFood Help Desk for assistance
- ACCESS NYC sends information to SchoolFood
- SchoolFood process within 2 days
- Student eligibility sent and displayed in **ATS** and **NPSIS**
- Schools send meal status letters home to parents / guardians

FORMER USM SCHOOLS



- Schools that exit the Universal School Meals (USM) Program**
 - **Must distribute and collect School Meals Applications**
 - **Send applications to SchoolFood for scanning**
- Former USM schools includes**
 - **Schools (in yrs 2, 3, 4 or with extension) removed because of budget reductions**
 - **Schools denied a cycle extension**
 - **Last year base year schools denied to continue**

APPLICATION SCANNING SCHOOLS

Public schools

- All district 3, 11, 15, 24 and 31 schools**
- All district 75 and 79 schools**
- All former USM schools including prior year base year schools**
- Schools with non-compliance rating from foodservice or Title I audits**

All participating charter schools

All participating non-public schools

SCANNING SCHOOLS

Applications Scanning Schools will

- Receive email from SchoolFood**
- Collect paper applications and documents from households**
- Use courier service to send applications to SchoolFood**
- View student eligibility in **ATS** and **NPSIS****
- Send meal status letters to households**
- Contact SchoolFood Help Desk with questions**

SCANNING SCHOOLS

- Email from SchoolFood includes**
 - Reminders**
 - Application preparation/submission instructions**
 - Application pickup instructions**
 - Important dates for former USM schools**
 - Deadline to submit applications**
 - Date cash collection begins**
 - Deadline for meal codes to qualify for Title 1 funding**

SCANNING SCHOOLS

- Collect completed paper applications from households**
- Review application prior to sending to SchoolFood**
 - **Student name (Part 2)**
 - **Write ID number for students in Part 2**
 - **Adult signature (Part 5)**
- Collect other documents**
- Make copies of applications and documents**

SCANNING SCHOOLS

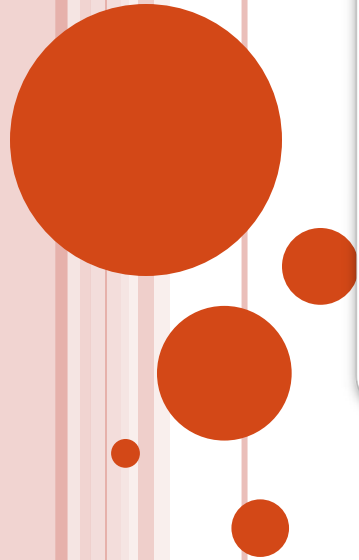
❑ Application Pickup – Deluxe Courier

- Standard pick-up day – every Wednesday
- Additional pick-up days available - Call SchoolFood

❑ Preparation/submission instructions

- Count applications and other documents
- Prepare SchoolFood **Batch Cover Sheet**
- Prepare SchoolFood **Return Label**
- Prepare envelopes and leave in mail drop-off /pickup area

STUDENT ELIGIBILITY FOR MEALS



STUDENT ELIGIBILITY

- ❑ **All student eligibility is displayed as **Meal Codes** in **ATS** and **NPSIS****
- ❑ **SchoolFood processes**
 - All online applications
 - Paper applications from scanning schools *and*
 - Other qualifying documents
- ❑ **Meal codes are displayed in student database**
 - Public and Charter schools – **ATS RMEL screen**
 - Non-Public schools – **NPSIS Meal Roster**
- ❑ **Track processed applications and documents on **ATS RMCU report****

STUDENT ELIGIBILITY

ATS and NPSIS database

- **Prior year meal codes deleted prior to first day of school**
- **Only new **Meal Code A** displayed on **Sept 8****
- **New **Meal Codes 1, 2, 3 and 4** displayed as new applications or qualifying documents are processed**
- **Prior year eligibility can be used until **October 22** – see *ATS RMEA and NPSIS Meal rosters***
- ****Meal Code 5** displayed on **October 25** for students with no application or new information**

PROCESSING INCOMPLETE APPLICATIONS

- ❑ **Incomplete applications cannot be processed**
 - **Missing or partial income, income frequency, SSN and signature**
 - **Invalid TANF or SNAP (food stamp) case number**
 - **Clarify foster child and household member information**

- ❑ **SchoolFood calls households to obtain information – if no response**
 - **Leave message with 800# – 800- 363-6325**
 - **Process and send **Meal Code 4** to ATS and NPSIS**

PROCESSING OTHER DOCUMENTS

- direct certification letter or **TANF** letter**
 - **State: Office of Temporary and Needy Family (OTDA)**
 - **Includes name of child, parent name and address**
- food stamp letter**
 - **Local: Food Stamp Centers**
 - **Includes all children in household, parent name and address**
- unemployment letter**
 - **State:**

STUDENT ELIGIBILITY LETTERS AND REPORTS

ATS RMCU report

- Shows history of all meal code changes
- Shows where application and type processed
 - SchoolFood or School; Paper or Online

Notice of Student Meal Eligibility

- HRA Match letter generated for new Meal Code A
- Letters generated automatically when SchoolFood sends meal codes to ATS and NPSIS
 - Includes **eligibility status** and **incomplete reason(s)**
 - Eligibility status is effective date of letter
- **Meal Code 5** letter generated for students without applications
- Schools are to send letters home to parents/guardians

STUDENT ELIGIBILITY MEAL CODES

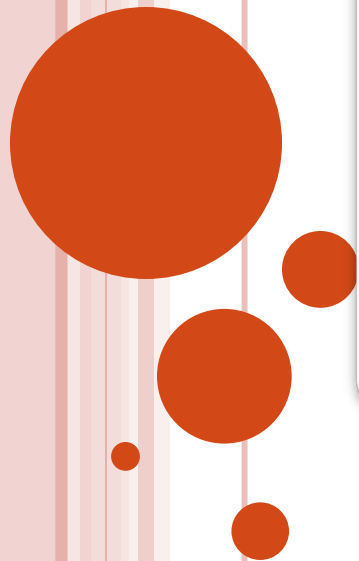
- Meal Code A = Free (HRA computer match)**
- Meal Code 1 = Free (income, foster, STH, qualifying documents)**
- Meal Code 2 = Reduced (income)**
- Meal Code 3 = Full Price (Paid – high income, do not qualify, will not participate)**
- Meal Code 4 = Full Price (Paid – incomplete form)**
- Meal Code 5 = Full Price (Paid – no form)**
- Blank = Full Price (Paid – new student default) – public schools only**

TITLE I ELIGIBILITY

TITLE 1 ELIGIBILITY

- All Public Schools – *only* ATS data is used for Title 1 funding**
 - **October 31 enrollment data**
 - **Meal Code data as of December 23**
 - ***Only* Meal Codes A, 1 and 2**
- Scanning Schools**
 - **December 23 – applications pickup deadline**
- Charter Schools**
 - **Contact Anyeli Matos for State process and submission date**
- Non-public schools**
 - **Check NPSIS Announcements for submission date**

IMPORTANT DATES AND SCHOOLFOOD CONTACT INFORMATION



DATES TO REMEMBER

□ Important dates for schools

- **September 8** – cash collection begins for all non USM schools **including last year base year schools** – *see SchoolFood website for list*
- **September 24** – deadline for former USM schools to submit applications to SchoolFood
- **October 1** – cash collection begins for former USM schools – *see SchoolFood website for list*
- **October 18** – deadline for all non-USM schools to obtain new applications from households **including last year base year schools**
- **October 22** – deadline to use prior year eligibility – *see ATS RMEA and NPSIS Meal rosters*
- **December 23** – deadline for meal codes to qualify for Title 1 funding

SCHOOLFOOD CONTACT INFORMATION

SCHOOLFOOD WEBSITE : <http://schools.nyc.gov/schoolfood>

SCHOOLFOOD HELP DESK

- ❖ **SCHOOLS:** Call: (718) 707-4400 Fax: (718) 349-5463
Send email to: FoodCompliance@schools.nyc.gov
- ❖ **HOUSEHOLDS:** Call: (877) 363-6325 [877-DOE-MEAL]
Send email to: FoodCompliance@schools.nyc.gov

SCHOOLFOOD ELIGIBILITY & COMPLIANCE UNIT

TEL: (718) 707-4471 • FAX: (718) 349-5463

NAME	TITLE	EMAIL ADDRESS
NADINE BROWN	CHIEF COMPLIANCE OFFICER	NadineB@schools.nyc.gov
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INGRID MAN-SON -HING	COMPLIANCE ASSISTANT SUPERVISOR	IMansonhing@schools.nyc.gov
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