

EXCHANGE SCHOOL LUNCH PROGRAM APPLICATION SY 2012-2013

Complete the entire application packet and submit all required information to Parent Central Services to determine eligibility. Incomplete applications will not be processed.

The Free and Reduced-Price meals in schools are a Federal Program administered by the Department of Agriculture under 7 CFR Chapter II, Part 245. This law establishes definitions, eligibility, and certification requirements pertaining to the program.

The program's 12 month period runs from **01 July 2012 to 30 June 2013**. Each year in the Federal Register (around 15 March), the Department publishes the Income Eligibility Guidelines for the coming year. *The Alaska scale is used for USAREUR.*

Families whose incomes are less than or equal to the reduced price criteria are eligible for either free or reduced-price meals.

To determine eligibility:

1. **Complete a current application** (AE Form 352-1A) including:
 - a. The names of all household members.
 - b. Provide the *last 4* of Social Security Number (SSN) and signature of the primary wage earner.
 - c. If another household member signs the application, the last 4 of their social security number will be required on the application.

2. **Provide Leave and Earning Statement:** i.e., a current leave and earnings statement (LES) of the military member and a current wage statement from any other employed household member. Income should be identified by source (earnings, wages, welfare, pensions, support payments, unemployment compensation, social security, or other cash income and the frequency the income is received (weekly, bi-weekly, twice a month, monthly).

Sure Start Program

Regardless of income, an application must be completed for all children attending Sure-Start.

****Random sampling of applications will be audited to verify eligibility accuracy and parent will be notified in writing of any changes. Documentation will be forwarded to AAFES.**

Military's Annual Pay Raise

Families in the program must notify CYSS Services' Parent Central Services of any decrease in household size or of increases in income over \$50.00 per month or \$600.00 per year.

Fraudulent Information

Providing fraudulent information may result in prosecution under the UCMJ or Federal Law and dismissal from the program.

Submit completed applications to CYSS Parent Central Services

Katterbach, building 5818 Room103: 09802-83-2533 Storck, building 6510 Room101: 09841-83-4880

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Note: ALL APPLICANTS MUST REAPPLY EVERY YEAR, BEGINNING JULY 1.

FOR OFFICIAL USE ONLY (when filled in)

**CONFIDENTIAL APPLICATION FOR FREE AND REDUCED-PRICE MEALS AND FREE MILK
(AE Reg 352-1)**

Privacy Act Statement

Authority: The National School Lunch Act (42 USC 1751) as amended by Public Law 91-248 (1970), DOD Directive 1015.5, DOD Student Meal and Reduced-Price Meals and Free Milk Program, and AE Regulation 352-1.

Principal purpose(s): To determine eligibility for free or reduced-price meals under the National School Lunch Act and DOD Student Meal and Reduced-Price Meals and Free Milk Program.

Routine use(s): This form will be used solely for the principal purpose(s) described above.

Mandatory or voluntary disclosure and effect on individual not providing information: Voluntary. However, the social security number is required under the provision of the National School Lunch Act before your child may receive free or reduced-priced lunch meals.

Please read instructions on page 2 before completing this form.

I. For Office Use Only

School year (YYYY)	Processed by	Date (YYYYMMDD)	Time (HH:MM)	Qualification category <input type="checkbox"/> Free <input type="checkbox"/> Reduced <input type="checkbox"/> Ineligible
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II. Family Information

1. Sponsor's name (last, first, middle initial)	2. Sponsor's SSN	3. Grade	4. Organization
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5. Duty telephone	6. PSC or CMR	7. Box	8. APO AE	9. Home telephone
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10. DEROs (YYYYMMDD)	11. E-mail address (work or home)	12. Spouse's name (last, first, middle initial)	13. Spouse's SSN
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14. Total members of household (Identify all children and other household members, including sponsor, regardless of age.)

a. Name (last, first)	b. Age	c. Grade	d. School

III. Family's Total Gross Monthly Income (before taxes)

1a. Type of Income	1b. Amount	1a. Type of Income	1b. Amount
(1) Base pay		(7) All other income (specify)	
(2) Basic allowance for subsistence - refer to LES			
(3) Support/allimony			
(4) Retirement/pension			
(5) Special duty pay			
(6) Spouse income			

1c. Total income:

IV. Certification Statement (Read and initial each statement and sign below.)

1a. Statement	1b. Initials
(1) This application is made in connection with the receipt of Federal funds. Deliberate misrepresentation of information may subject the applicant to prosecution under applicable Federal Law or other regulations.	
(2) Meals covered in the free and reduced-price lunch program are for 1 year USDA-approved tray lunch per day (excludes lunch plus and double lunch).	
(3) A la cart food items are not covered under the free and reduced-price lunch program and will incur a charge to the student's account at the posted price.	
(4) I understand that eligibility is valid only for the current school year and that another application must be submitted to determine eligibility for each new school year.	
(5) I certify that all of the above information is true and correct to the best of my knowledge.	

2. Date (YYYYMMDD)	3. Signature
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Instructions

To enroll in the Free and Reduced-Price School Lunch Program, please complete the application and submit it with a copy of your most current leave and earnings statement or pay stub (and your spouse's, if applicable).

Applications Submitted Without an LES Cannot Be Processed.

Section II

The disclosure of the social security number (SSN) of household members is completely voluntary. However, it is required under the provision of the Richard B. Russell National School Lunch Act before your child may receive free or reduced-price lunch meals. If no SSN is available, please list the foreign national identification number from your military-issued ID card. Please list all members of your household and all your dependent children, including ones who do not attend Department of Defense Dependents Schools-Europe.

Section III

- Base pay
- Basic allowance for subsistence

Include if applicable:

- Support/alimony
- Retirement/pension
- Special duty pay
- Spouse income (if spouse employment is not regular (for example, babysitting, substitute teaching, seasonal or temporary hire), provide average monthly income)
- Other income (report all other forms of regular income, including any Government-subsidized children's allowance or Federal Social Services Administration (Food Stamp Program)).

Calculate these amounts to determine total monthly income. (Basic allowance for housing is not calculated.)

***Note for Deployed Personnel**

If a spouse is deployed in support of overseas contingency operations, only the portion of the spouse's income that is made available to the Family is counted for eligibility purposes. If this applies, state on the LES what amount of the deployed member's income is being retained by the member and the gross amount that is made available for the Family's support.

Section IV

Your signature on the application certifies that all of the above information provided on the application is true and correct to the best of your knowledge. Providing fraudulent information may result in prosecution under the UCMJ or Federal Law and dismissal from the program.