Dear Parent or Guardian:

In compliance with Education Code Section 49550, Eagle Collegiate Academy will serve nutritious lunches every school day to qualifying children. Children from *households** whose income is at or below the levels shown on the Gross Income Scale below are eligible for free meals. If you do not meet the criteria, but still need assistance, please fill out the attached application and return by email at eaglecollegiate@gmail.com. Meal applications are NOT only for meals, they can also help INCREASE ECA funding.

The information you give is confidential and will be used only for purposes of determining eligibility for free meals. Your application will be reviewed and you may be asked to provide further documentation of your income. Within ten working days, the school will let you know whether or not you qualify. If you do not agree with the decision, you may wish to discuss it with Student Services. If you wish to review the decision further, you have a right to a fair hearing. This can be done by calling or writing:

Eagle Collegiate Academy PO BOX 803234 Santa Clarita, CA 91390 Tel (661) 347 6016

In certain cases, foster children are also eligible for these benefits. If you have foster children living with you and wish to apply for free meals for them, please indicate it on this form.

If there is a change in your family's income due to reasons such as employment or a change in your family size, please contact us. This change could affect your child's eligibility for free meals.

To apply, please fill out the form below and return to eaglecollegiate@gmail.com

CALIFORNIA ELIGIBILITY SCALE FOR FREE OR REDUCED PRICE MEALS July 1, 2021-June 30, 2022

	GROSS INCOME SCALE			
HOUSEHOLD SIZE	Weekly	Monthly	Annual	
1*	\$ 322	\$1,396	\$ 16,744	
2	\$ 436	\$ 1,888	\$ 22,646	
3	\$ 549	\$ 2,379	\$ 28,548	
4	\$ 663	\$ 2,871	\$ 34,450	
5	\$ 776	\$ 3,363	\$ 40,352	
6	\$ 890	\$ 3,855	\$ 46,254	
7	\$1,003	\$ 4,347	\$ 52,156	
8	\$1,117	\$ 4,839	\$ 58,058	
For each additional household member add:	\$ 114	\$ 492	\$ 5,902	

^{*}For example, a household of one means a pupil who is his/her sole support and a household of two might be a single parent and one child. Institutionalized children are always one-member households. Foster children are one-member households only if the welfare/placement agency maintains legal responsibility for the child. Household means a group of related or non-related individuals living as one economic unit.

Eagle Collegiate Academy APPLICATION FOR FREE AND REDUCED LUNCH 2021-22

To apply for the free lunch program, please complete this form, attach earnings statements, and return to eaglecollegiate@gmail.com

1. ALL HOUSEHOLDS COMPLETE THIS SECTION

STUDENT/CHILD INFORMATION			FOOD STAMP (FS), AFDC OR FDPIR BENEFITS		FOSTER CHILD	
Last Name	First Name	Grade	YES/NO	If YES, enter the FS, AFDC, or FDPIR case no.	YES/NO	If YES, enter child's monthly personal use income
1						
2						
3						
4						
5						
6						

II. HOUSEHOLD MEMBERS AND MONTHLY INCOME: (IF YOU ENTERED A FOOD STAMP, AFDC, OR FDPIR CASE NUMBER FOR EACH CHILD, SKIP TO SECTION III.)

List <u>all</u> adult household members, as well as parents sharing joint custody, and indicate the amount and source of <u>MONTHLY INCOME</u> each adult received for the last month. If any amount last month was more or less than usual, enter the usual monthly income. <u>ATTACH EARNINGS STATEMENTS FROM LAST MONTH FROM ALL</u> SOURCES LISTED BELOW TO THIS FORM.

Last Name	First Name	Gross Earning from work (before deductions) include all jobs	Pension, Retirement, Social Security	Welfare Benefits, Child Support, Alimony Payments	Any Other Monthly Income	Total Monthly Income
1		\$	\$	\$	\$	\$
2		\$	\$	\$	\$	\$
3		\$	\$	\$	\$	\$
4		\$	\$	\$	\$	\$

III. ALL HOUSEHOLDS READ AND COMPLETE THIS SECTION.

<u>California Education Code Section 49557(a):</u> Applications for free and reduced price meals may be submitted at any time during the school year. Children participating in the 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 any other means.

Non-Discrimination Statement: In accordance with the Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at:

http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter 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; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. This institution is an equal opportunity provider.

Privacy Act Statement: National School Lunch Act (Section 9) requires that, unless your child's food stamp, AFDC, or FDPIR case number is
provided, you must include the social security number of the adult household member signing the application or indicate that the household member
signing the application does not have a social security number. Provision of a social security number is not mandatory, but if a social security number is
not given or an indication is not made the signer does not have such a number, the application cannot be approved. The social security number may be
used to identify the household member in carrying out efforts to verify the correctness of the information stated on the application. These verification
efforts may be carried out through program reviews, audits, and investigations and may include contacting employers to determine income, benefits,
contacting the State employment security office to determine the amount of benefits received and checking the documentation produced by household
members to prove the amount of income received. These efforts may result in a loss or reduction of benefits, administrative claims or legal actions if
incorrect information is reported.

I certify that all of the above information is true and correct and that all income is reported. I understand that this information is given for the receipt of Federal funds; that school officials may verify the information on the application and that deliberate misrepresentation of the information may subject me to prosecution under applicable State and Federal laws.

Signature of adult household member completing this form	Last 4 digits of Social Security Number	Date	
Printed Name	Home Phone	Work Phone	
Residence Address	City	Zip Code	