# SCHOOL SDIRIT



# Monticello Community School District

Dr. Brian Jaeger, Superintendent

PH 319-465-3000

FAX 319-465-6050

WEB www.monticello.k12.ia.us

Hello everyone,

We are back, in print, by popular demand. Thank you to everyone who so kindly shared with me how much they missed the *School Spirit* newsletter being delivered to their home each month. I am very happy that we are able to bring this back to our community each month, but even MORE happy that people care so much about things that are going on in our school district. I really have so much to share with you...so here we go!

The 21 acres of property that the school district purchased adjacent to the high school/middle school site is planted with beans! I do not know anything about farming but I do know education very well. This is a wonderful learning opportunity for our agriculture students to work with Mr. Schmitt and gain some real world experience in farming as well as the business side of the farming industry. These are the kind of real life learning opportunities that educators dream about. So a BIG THANK YOU to Mr. Schmitt and several volunteers/donors who have made this unique learning opportunity possible.

Our School Resource Officer (SRO) Dawn Graver, myself, and the rest of the administrative team met to review our District Emergency Plan and we have scheduled several safety training sessions. The police department and law enforcement from Jones County will be using the high school, middle school, and Carpenter to do some emergency training in our district. This is a real advantage to familiarize law enforcement with our buildings in the event of an emergency during the school year. We will also be training our teaching staff in August as a group and by building on scenarios and how to respond to emergency situations. Then when school starts we will have our teachers deliver training to our students on emergency situations. Let's all hope that this is training we never have to use.

Finally, I am sure you have heard about this already. We are holding a bond election on November 5 for the community to decide on a \$15 million dollar bond to pay for part of a \$26.5 million dollar elementary school in Monticello. It would be similar in size and stature to the new middle school and it would be connected to the new middle school finalizing the concept of a single campus plan for our school district. Our school facility committee made up of a very broad cross section of our community members, voted unanimously to ask the school board to call for an election in November. This is a very good sign that the plan is something our community can get behind. So all I am asking of everyone living in the Monticello Community School District, is to approach this with an open mind, and to keep an open mind until you hear all the facts about this plan. This fall we will be on a mission to get the facts out to our community through forums, tours, videos, newsletters, postcards, flyers, etc. Until then, enjoy the summer and remember to keep an open mind and listen to the facts, not the rumors. My job is to prepare you to be an informed voter when you walk into that voting booth on November 5.



As always, feel free to give me a call or stop in anytime if you have questions. Thank you ALL for your continued support of the Monticello Community School District.

Sincerely,

BM

Brian Jaeger, Superintendent

The **MISSION** of the Monticello Community Schools, a district striving for educational excellence, is to prepare students through challenging experiences, to be caring, productive, creative citizens, who will be life-long learners.

**July 2024** 



# NOTES

of the Monticello Community School District

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# SPECIAL POINTS OF INTEREST

Free & Reduced Application for 2024-25 school year on pages 6-14

# UPCOMING EVENTS

Stop by for breakfast or lunch after your open gym/practice or before going to the pool!



Location: Shannon Elementary, 321 W South St, Monticello Time: Breakfast hours: 8:00 - 8:30am (dine in only)

Lunch hours: 11:00 - 11:45am (dine in only) Days: Monday-Friday from June 3-August 9 (closed on July 4 & 5)

For kids and teens under 18 No registration or application required





### July Calendar July 1 JV SB/BB DH vs Maguoketa-10:00 V SB DH vs Vinton-Shellsburg-5:00 July 2 V SB/BB DH vs Beckman-5:00 July 5 JV/V SB vs Dbg. Senior-5:00 July 6 District Baseball @ TBA-5:00 V SB DH vs CPU-5:00 July 8 July 8-11 K-8 Basketball Camp July 11 SB Regionals @ TBA-7:00 July 22-24 K-8 Soccer Camp July 22 Board Meeting-6:00 Aug. 5-7 Little Panther Volleyball Camp



- Thank you to Orbis for the donation of totes to Panther Academy.
- Thank you to Maria Theresa Gomez Reynolds for the donation of art supplies to Panther Academy.
- Thank you to **Donna Sauser** for the donation of prizes to the elementary specials classrooms.
- Thank you to Robin & Max Luensman for their donation to Panther Academy.

# **Summer Office Hours**

The High School Office hours for July are Monday-Thursday from 8:00- Noon. Closed on Fridays.

The Shannon, Carpenter, and Middle School Offices are closed in July and will be back open on August 1.

The District Office is open daily in the summer Monday-Friday from 8:00-4:00 (unless otherwise posted).



## **Panther Basketball Camp**

Boys and Girls entering grades K-8 Who:

When: July 8-11

10:00-11:30am daily, students entering K-4 12:00-2:00pm daily, students entering 5-8

Where: Monticello HS/MS Gyms

Tuition: \$65.00 (includes camp t-shirt and prizes)

# **Panther Soccer Camp**

Who: Boys and Girls entering grades K-8

When: July 22-24

6-7pm daily, students entering K-4 7:15-8:15pm daily, students entering 5-8

Where: Monticello HS Soccer Practice Fields Tuition: \$45 (includes camp t-shirt and prizes)

### Panther Volleyball Camp

Students entering 3rd-8th grades Who:

When: August 5-7 from 12-3pm

Where: Monticello HS

Tuition: \$65.00 (includes camp t-shirt and prizes)

Sign up by completing the forms on our website: https://www.monticello.k12.ia.us/friday-folders-2/

# **School Permit Information**

Please contact Rachel in the HS office to set up a meeting with Principal Schauf if your student is interested in getting a school permit. (319-465-3000, option 2 or rachel.bowser@monticello.k12.ia.us)

# Qualifications for a school permit:

- Must be at least 14 ½ years old.
- Must have successfully completed Driver's Education
- Must have had Instruction/Learner's Permit & clean record for at least 6 months.
- Must live at least 1 mile from the school's front drive to your driveway.
- Must have Affidavit for School License form signed by School and Parent/Guardian.

# ELEMENTARY SCHOOL PROJECT -

# **Designing Schools for Today's Students**

A lot has changed in education and in Monticello in the more than 60 and 70 years since Monticello's elementary schools – Shannon and Carpenter – were built. In fact, Carpenter was constructed five years before the current Monticello Community School District was formed. Over the last half a century, our homes, grocery stores, gas stations, etc... have all evolved. Take for example, self-check kiosks. Or when was the last time someone else pumped your gas?

Similarly, how we teach and learn has also changed. So, it stands to reason that schools today are designed differently than they were when Monticello's elementary schools were built. If you've been in the new Monticello Middle School recently, you know that today's schools are designed to be:



# Collaborative

Small group collaboration zones and flexible gathering spaces are hall-marks of next generation schools. Good design makes room for formal and informal learning opportunities. Integrating technology into curriculum and classrooms creates environments where students can discuss, collaborate, and produce. From something as simple as the number and location of outlets in a room, to mobile furniture that supports the use of personal technologies and flexible classrooms with interactive displays, white boards, and idea generation recording options, technology is compelling change.



### **Flexible**

New modes of teaching and engaging students mean that classrooms need to be maximized for flexibility. Creating spaces that accommodate multiple classroom configurations rapidly with minimal effort is a key element of next-generation school design. The goal is to future proof spaces so the facility is adaptable to the needs of future generations.



# Secure

School security is a vital issue. Ensuring the safety of students, faculty, and staff is an essential priority. Smart school design includes limiting the number of entrances, eliminating dead-end hallways, nooks, and crannies, and a host of other effective strategies. Video surveillance, barriers, mechanical entry-control devices, and alarms can be thoughtfully integrated to ensure safety without compromising comfort.



# **Experiential & Project-Based**

Media centers are no longer traditional single-purpose spaces. Instead, they serve as agile, user-curated, active, and informal classrooms, studios, labs and maker spaces, which fully engage and connect students with each other and with teachers. Maker spaces, hacker spaces, and digital zones offer ways for students to deepen critical digital literacy skills and build skills for future careers.

# 2024-25 SCHOOL YEAR

# The 2024-25 school year begins Friday, August 23!

The 2024-25 school calendar can be found on our website.

# Monticello CSD 2024-25 Fee Schedule



Approved: 5/20/24

BOOK FEES	
Elementary	
Middle School	
High School	
FOOD SERVICE FEES:	
Lunch - Elementary (K-4)	
Lunch - Middle School (5-8)	
Lunch - High School (9-12)	
Extra Lunch (5-12 only)	
Lunch - Adult	
Lunch Card -replacement fee	
Breakfast - (K-12)	
Breakfast - Adult	
Milk (extra)	

	202 Annu		
Fu	II Rate		Reduced Rate
\$	55.00	\$	27.50
\$	70.00	\$	35.00
\$	85.00	\$	42.50
Fu	II Rate		Reduced Rate
\$	2.50	\$	0.40
\$	2.60	\$	0.40
\$ \$ \$ \$	2.60	\$	0.40
\$	2.60	45.0	not applicable
\$	4.70		not applicable
\$	3.00		not applicable
\$	1.80	\$	0.30
\$	2.10		not applicable
\$	0.45		not applicable

To qualify for free or reduced rate an application for free or reduced meals must be approved annually

PRESCHOOL TUITION: (4-	year olds)
Preschool - 4 days per we	ek
(includes breakfast, lunch, si	nack, and snack milk)
PANTHER ACADEMY (Bef	ore & After & Summer Childcare,
Summer Registration Fee	
School Year Registration F	-ee
Daily Fees:	
1st child	
2nd child	
3rd child	
Non-School Days & Sumn	ner Fees:
<u>Full Day</u>	
1st child	
2nd child	
3rd child	
<u>Half Day</u>	
1st child	
2nd child	
3rd child	

	Full Rate	Reduced Rate
\$	135.00	not applicable
	per month	
	Full Rate	Reduced Rate
\$	40.00	not applicable
\$	40.00	not applicable
\$6.	00 per hour	not applicable
\$5.	50 per hour	not applicable
\$5.	00 per hour	not applicable
\$	32.50	not applicable
\$ \$ \$	30.25	not applicable
\$	27.75	not applicable
\$	27.00	not applicable
\$ \$ \$	25.00	not applicable
\$	23.00	not applicable

OTHER FEES:	
thletics Punch Card (10 punches) - Students & Senior Citizens <i>(ag</i> <i>i5 and older)</i>	e
Athletics Punch Card (10 punches) - Adults	
ranscript Fee	
Priver's Education	
arking Fine	
arking Tag	
ost or Damaged Book Fine	
ost Uniform	
adlocks (Middle School Only) - optional	
Choir and Band- Uniform Cleaning (HS only )	
chool Dances (WPA, Homecoming, etc)	
Recorder purchases (Elementary only) - Optional	
nstrument Rental - Optional	
larmonica purchases (MS only) - Optional	

F	ull Rate		Reduced Rate
\$	40.00		not applicable
\$ \$	50.00		not applicable
\$	5.00		not applicable
\$ \$10 or \$	320.00 5 if paid within	\$	160.00
4	8 hours		not applicable
1st o	ne no cost	2n	d \$2.00 each
repla	cement fee		not applicable
repla	cement fee		not applicable
\$	7.00		00 refund at the end of the when padlock is returned
\$ \$	20.00	\$	10.00
\$	5.00		not applicable
\$	5.00		not applicable
\$	50.00	\$	25.00
\$	4.00		not applicable

ty Admission Prices (conference approved):	
<u>chool</u>	
lts	
dents & Senior Citizens (age 65 and older)	
e School	
lts	
dents & Senior Citizens (age 65 and older)	

Full Rate	Reduced Rate
\$ 7.00	not applicable
\$ 7.00	not applicable
\$ 5.00	not applicable
FREE	not applicable

Open House @ All Schools is Wednesday, August 21

Elementary: 4:30-6:00 pm Middle School: 5-6:30 pm High School: 5:30-7:00 pm



School supply lists are available in the District Office or on

our website.

Free/reduced school fees are determined by completing the free/reduced meals application that is in this newsletter. Please complete & return by July 29; otherwise you will be charged the full fee at registration time. It only takes a few minutes! Even if you don't think you'll qualify, fill it out!

# 2024-25 School Year Important <u>Dates:</u>

- Online Registration will begin on July 29.
- Open House is Wednesday, August 21 Elementary from 4:30-6pm; MS from 5-6:30pm; HS from 5:30-7pm
- First Day of School is Friday, August 23,
- Homecoming Week is September 16-21
- Spring Break is March 17-21, 2025
- Graduation is Sunday, May 25, 2025 at 2:00pm

The full 2024-25 calendar is available on our website.

# 2024-25 REGISTRATION

Registration for the Monticello Community School District for the 2024-25 school year will be done **ONLINE** again this year. All families are required to register their students in Infinite Campus through the process known as Online Registration (OLR). **Online registration (OLR) will be open later this month**—watch your email! OLR allows parents to register at their own convenience and to save time for future years. Once OLR is open, please follow the steps below.

# **RETURNING Students - Steps to Register:**

- 1. Login to the Infinite Campus Parent Portal. If you do not know your login, please email morgan.murray@monticello.k12.ia.us
- 2. Click on the Main Menu in the top left corner
- 3. Click More
- 4. Click on Online Registration
- 5. Click 24-25 Online Registration (OLR) Existing Student Registration
- 6. If you have a new incoming student (i.e. preschooler, kindergartener, private school), you will be able to add them to your current student's OLR. When you log into the parent portal and see your list of students, look for the "Add Student" button.
- 7. Click Start
- 8. Once completed be sure to pay any fees due and also add money to your food service account\*

\*You are able to pay online for fees and lunch once you are logged in. You can pay by credit or debit card (a convenience fee of 3.61% will be charged), or by e-check (a convenience fee of only 35 cents will be charged). **During the week of August 5-9, the convenience fees will be waived.** If you don't wish to pay online, payment can be mailed or made at your school building.

Online registration needs to be done by August 14. If you are unable to register online, please contact your building secretary (after Aug.1) to set up a time to register. Support for online registration will NOT be available at Open House.

Schedules, padlocks, chromebooks, etc. can be picked up at Open House once fees have been paid. Please check our website and Facebook page regularly for updates.

Note: Some documents are required for returning families/students, depending on the grade level your child is in. They can be uploaded, emailed, or dropped off at your school building.

If you have any questions or need help registering, please email morgan.murray@monticello.k12.ia.us or call 319-320-1132.

# **NEW Students**:

Welcome to Monticello CSD! If you are a new family to our district, please contact Judy Hayen at <a href="mailto:judy.hayen@monticello.k12.ia.us">judy.hayen@monticello.k12.ia.us</a> and include your address, student's name and birth date. Then, once OLR opens later this month, you will be sent a link to register online.

(PLEASE NOTE: Building Secretaries will not be back in the office until August 1st)

Here's to a great 2024-25 school year!

NOTICE OF NONDISCRIMINATION-Students, parents, employees, and others doing business with or performing services for the Monticello Community School District are hereby notified that the District does not discriminate on the basis of race, color, national origin, sex, disability, religion, creed, age, sexual orientation, gender identity, or genetic information (for employment) in any of its education programs, activities, or employment opportunities, pursuant to Title IX of the Education Amendments of 1972, Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and other applicable state and federal laws. This prohibition on discrimination applies to admission and employment. The District has adopted grievance procedures for processing and resolving formal and informal Title IX sex discrimination and sexual harassment complaints and other discrimination complaints. Inquiries regarding sex discrimination pursuant to Title IX of the District's nondiscrimination policy may be directed to the District's Title IX Coordinator, Todd Werner, 860 East Oak Street, Monticello, Iowa 52310, 319-465-3000 ext.2101, todd.werner@monticello.k12.ia.us; other grievances or complaints related to the District's nondiscrimination policy may be directed to the District's Equity Coordinator, Todd Werner, at 860 East Oak Street, Monticello, Iowa, 319-465-3000 ext.2101, todd.werner@monticello.k12.ia.us. Inquiries related to sex discrimination pursuant to Title IX may also be referred to U.S. Department of Education (attn. Assistant Secretary, Office for Civil Rights; 400 Maryland Avenue Southwest, Washington, DC 20202; 800-421-3481; OCR@ed.gov). Inquires related to other grievances or complaints may be directed to the Director of the Office for Civil Rights U.S. Department of Education, Citigroup Center, 500 W. Madison Street, Suite 1475, Chicago, IL 60661-7204, Telephone: (312) 730-1560 Facsimile: (312) 730-1576, Email: OCR.Chicago@ed.gov)

# FREE & REDUCED INFO

# Free and Reduced Meal Application

The application for free and reduced price school meal application for the 2024-25 school year is in this issue. Please complete carefully. Families wishing to apply should complete the enclosed application <u>in it's entirety</u> and return it to the Superintendent's Office, 850 E Oak Street or mail to Food Service, Monticello Schools, 850 E Oak Street, Monticello, IA 52310 by <u>July 29!</u> Applications are also available on our <u>website</u>. The State recommends you apply whether you think you qualify or not. If your child(ren) qualifies for free or reduced-price meals, you may also be eligible for other benefits (registration fees, etc.), so please complete and return to us!

# INFORMATION LETTER FOR FREE AND REDUCED PRICE SCHOOL MEAL APPLICATION Frequently Asked Questions About Free and Reduced Price School Meals

## Dear Parent/Guardian:

Children need healthy meals to learn. Monticello Community School District offers healthy meals every school day. Breakfast costs \$1.80; lunch costs (K-4) \$2.50 per meal; MS & HS lunch costs \$2.60 per meal. Your children may qualify for free meals/milk or for reduced price meals. Reduced price is \$.30 for breakfast and \$.40 for lunch. Return or mail the completed application to: Pat Kelly, Monticello High School, 850 East Oak Street, Monticello, IA 52310 by July 29, 2024. Below are some common questions and answers to help you with the application process.

### 1.WHO CAN GET FREE OR REDUCED PRICE MEALS?

- All children in households receiving benefits from the Supplemental Nutrition Assistance Program (SNAP), the Family Investment Program (FIP) or a few specific Medicaid programs are eligible for free or reduced price meals.
- Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals.
- Children participating in their school's Head Start program are eligible for free meals.
- Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
- Children may receive free or reduced price meals if your household's income is at or below the limits on the Federal Income Eligibility Guidelines below and submit an application for free and reduced price meals/milk.
   FEDERAL INCOME ELIGIBILITY GUIDELINES for SCHOOL YEAR 2024-2025

Household Size	Yearly	Monthly	Twice per Month	Every Two Weeks	Weekly
1	27,861	2,322	1,161	1,072	536
2	37,814	3,152	1,576	1,455	728
3	47,767	3,981	1,991	1,838	919
4	57,720	4,810	2,405	2,220	1,110
5	67,673	5,640	2,820	2,603	1,302
6	77,626	6,469	3,235	2,986	1,493
7	87,579	7,299	3,650	3,369	1,685
8	97,532	8,128	4,064	3,752	1,876
Each additional					
family member:	9,953	830	415	383	192

- 2.SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE OR REDUCED PRICE MEALS? No, but please read the letter carefully and follow the instructions. If any children in your household were missing from your notification, contact: **Pat Kelly, Monticello High School, 850 East Oak Street, Monticello, IA, 52310, 319-465-3000, option 8** immediately as eligibility for free or reduced price meals is extended to all school age children in a household. If you did not receive a letter from the school, but received a Free Lunch Notice from the lowa Department of Health and Human Services (Iowa HHS), submit this letter to your children's school. You may add any students living in your household who are not listed on the letter. Also, if someone in your household receives SNAP or FIP benefits and you did not receive either of these letters, you may complete an application listing the case number as this will qualify all school age children in your household for free meals. If you were informed that your children will get reduced price meals, see the income guidelines above and if you feel you would qualify for free meal benefits, complete an application for free and reduced price meals.
- 3.WHAT IF WE HAVE FOSTER CHILDREN? Households with foster and non-foster children may choose to include the foster child as a household member, as this may help other children in the household qualify for benefits. If the foster family is not eligible for free or reduced price meal benefits, that does not prevent a foster child from receiving free meal benefits.
- 4.HOW DO I KNOW IF MY CHILDREN QUALIFY AS HOMELESS, MIGRANT OR RUNAWAY? Do the members of your household lack a permanent address? Are you staying together in a shelter, hotel, or other temporary housing arrangement? Does your family relocate on a seasonal basis? Are any children living with you who have chosen to leave their prior family or household? If you believe children in your household meet these descriptions and haven't been told your children will get free meals, please contact: Superintendent Brian Jaeger, Monticello Community School District, 850 East Oak Street, Monticello, IA, 52310, 319-465-3000 or <a href="mailto:brian-jaeger@monticello.k12.ia.us">brian-jaeger@monticello.k12.ia.us</a>.

- 4. DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD? No, complete the applications for free and reduced price school meals for all the students in your household. We cannot approve an application unless complete eligibility information is submitted, so be sure to complete all required information.
- 5. MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT A NEW ONE? Yes, your child's application is only good for that school year and for the first few days of this school year, through **October 4, 2024.** You must complete a new application unless the school told you that your child is eligible for the new school year. When the carryover period ends, unless you are notified that your children will receive free meals or you submit an application that is approved, the children must pay full price for school meals. The school is not required to send a reminder or a notice of expired eligibility.
- 6. I GET WIC. CAN MY CHILDREN GET FREE MEALS? Children in households participating in WIC <u>may</u> be eligible for free or reduced price meals. Please complete and send in an application.
- 7. MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN? Yes, you, your children or other household members do not have to be U.S. citizens to apply for free or reduced price meals.
- 8. WILL THE INFORMATION I GIVE BE CHECKED? Yes, we may also ask you to send written proof of the household income you report. You are not required to provide proof with your application.
- 9. IF I DON'T QUALIFY NOW, MAY I APPLY LATER? Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free or reduced price meals if the household income drops below the income limit, if your household size goes up, or if you start getting SNAP, FIP or other benefits.
- WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION? You should talk to your school officials. You also may ask for a hearing by calling or writing to: Superintendent Brian Jaeger, Monticello Community School District, 850 East Oak Street, Monticello, IA, 52310, 319-465-3000 or <a href="mailto:brian-in-bria
- 11. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you normally receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
- 12. WHAT IF SOME HOUSEHOLD MEMBERS HAVE NO INCOME TO REPORT? Household members may not receive the types of income we ask you to report on the application, or may not receive income at all. Whenever this happens, please write a 0 in the field. However, if any income fields are left empty or blank, those will also be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you meant to do so.
- 13. WE ARE IN THE MILITARY. DO WE REPORT OUR INCOME DIFFERENTLY? Your basic pay and cash bonuses must be reported as income. If you get any cash value allowances for off-base housing, food or clothing, or receive Family Subsistence Supplemental Allowance payments, it must also be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. Any additional combat pay resulting from deployment is also excluded from income.
- 14. DO I NEED TO PROVIDE MY SOCIAL SECURITY NUMBER? Only the last four digits of the Social Security Number of the household's primary wage earner or another adult household member (or an indication of "none") is needed.
- 15. WHAT IF THERE ISN'T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY? List any additional house-hold members on a Supplemental Worksheet and attach it to your application. Contact <a href="Pat Kelly">Pat Kelly</a>, Monticello High School, 850 East Oak Street, Monticello, IA, 52310, 319-465-3000, option 8 or <a href="pat.kelly@monticello.k12.ia.us">pat.kelly@monticello.k12.ia.us</a> to receive a Supplemental Worksheet.
- 16. WHO CAN GET FREE MILK? If your school participates in the Special Milk Program for half day kindergarteners, your kindergarten child may be eligible for free milk. Children who buy extra milk with a meal or if they eat breakfast or lunch and have an afternoon milk break, are not eligible to receive free milk.
- 17. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for SNAP or other assistance benefits, contact your local assistance office or call **1-877-347-5678**. Your children may be eligible for Hawki (children's health insurance) or a waiver of school fees. Read the information on the back of the Application for Hawki information. A school waiver form is available from your school.

- 18. CAN CHILDREN WITH DISABILITIES GET FOOD SUBSTITUTIONS? If a child has a disability, as determined by a licensed medical professional, and the disability prevents the child from eating the regular school meal, the school will make substitutions prescribed by the licensed medical professional. If a substitution is needed, there will be no extra charge for the meal. Please note, however, that the school is not required to make a substitution for a food allergy, unless it meets the definition of disability. Please call the school for further information.
- 19. DO I NEED TO REPORT MY RACE AND ETHNICITY? It is optional to complete the racial/ethnic portion of the application.
- 20. Translated applications are available at: http://www.fns.usda.gov/school-meals/translated-applications.

If you have other questions or need help, call Pat Kelly, 319-465-3000, option 8.

Sincerely,

## Pat Kelly, Food Service Director

### **USDA Nondiscrimination Statement:**

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: <a href="https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf">https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf</a>, 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:

### mail:

U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or
fax:
(833) 256-1665 or (202) 690-7442; or
email:

<u>program.intake@usda.gov</u>
This institution is an equal opportunity provider.

**lowa Non-Discrimination Statement:** "It is the policy of this CNP provider not to discriminate on the basis of race, creed, color, sex, sexual orientation, gender identity, national origin, disability, age, or religion in its programs, activities, or employment practices as required by the lowa Code section 216.6, 216.7, and 216.9. If you have questions or grievances related to compliance with this policy by this CNP Provider, please contact the lowa Civil Rights Commission, Grimes State Office building, 400 E. 14<sup>th</sup> St. Des Moines, IA 50319-1004; phone number 515- 281-4121, 800-457-4416; website: <a href="https://icrc.iowa.gov/">https://icrc.iowa.gov/</a>."

### **Information Statement**

The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not submit all needed information, we cannot approve your child for free or reduced-price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Family Investment Program (FIP) or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced-price meals, and for administration and enforcement of the lunch and breakfast programs. We may share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of programs rules.

# HOW TO APPLY FOR FREE AND REDUCED PRICE SCHOOL MEALS/MILK

Please use these instructions to help you fill out the application for free or reduced price school meals/milk. You only need to submit **one** application per household, even if your children attend more than one school in **Monticello**Community School District. Please follow these instructions in order. Each step of the instructions is the same as the steps on your application. The application must be filled out completely to certify your children for free or reduced price school meals. Completed applications should be mailed or returned to Pat Kelly, Monticello High School, 850 East Oak Street, Monticello, IA, 52310. If at any time you are not sure what to do next, please contact Pat Kelly at pat.kelly@monticello.k12.ia.us or 319-465-3000, option 8.

PLEASE USE A PEN (NOT A PENCIL) WHEN FILLING OUT THE APPLICATION AND DO YOUR BEST TO PRINT CLEARLY.

STEP 1: LIST ALL HOUSEHOLD MEMBERS WHO ARE INFANTS, CHILDREN AND STUDENTS UP TO AND INCLUDING GRADE 12.

Tell us how many infants, children and school students live in your household. They do NOT have to be related to you to be a part of your household.

**Who should I list here?** When filling out this section, please include all members in your household who are: Children age 18 or under **and** are supported with the household's income;

In your care under a foster arrangement or qualify as homeless, migrant or runaway youth; Students attending **Monticello Community School District,** regardless of age.

- A) List each child's name and date of birth. Print each child's first name, middle initial, last name and date of birth (optional). Use one line of the application for each child. If there are more children present than lines on the application, attach a Supplemental Worksheet, which can be obtained from the school, with all required information for the additional children.
- B) Is the child a student? Mark 'Yes' or 'No' under the column titled "student" to tell us which children attend Monticello Community School District. If you marked 'Yes' write where the child attends school and write the grade level of the student in the "Grade" column to the right.
- C) Do you have any foster children? If any children listed are foster children, mark the "Foster Child" box next to the child's name. If you are ONLY applying for foster children, after finishing STEP 1, go to "STEP 4".

  Foster children who live with you may count as members of your household and should be listed on your application. If you are applying for both foster and non-foster children, go to step 3.
- **D)** Are any children homeless, migrant or runaway? If you believe any child listed in this section may meet this description, mark the "Homeless, Migrant, Runaway" box next to the child's name and **complete all steps** of the application.
- E) Share children's racial and ethnic identities (optional). Next to each child's name, we ask you to share information about your children's race and ethnicity. This field is optional and does not affect your children's

# **STEP 2**: DO ANY HOUSEHOLD MEMBERS CURRENTLY PARTICIPATE IN the Supplemental Nutrition Assistance Program (SNAP), Family Investment Program (FIP) OR FDPIR?

If anyone in your household (including you) currently participates in one or more of the assistance programs listed below, your children are eligible for free school meals:

The Supplemental Nutrition Assistance Program (SNAP-formerly Food Assistance in Iowa)

The Family Investment Program (FIP)

The Food Distribution Program on Indian Reservations (FDPIR)

eligibility for free or reduced price school meals.

- If 'NO', go to STEP 3. (Leave the rest of STEP 2 blank)
- If 'YES,' provide a case number for SNAP, FIP, or FDPIR. You only need to write one case number. Case numbers are located on your Notice of Decision. Go to STEP 4.

# STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

Report all amounts in GROSS INCOME ONLY. Report all income in whole dollars. Do not include cents.

Gross income is the total income received before taxes.

Many people think of income as the amount they "take home" and not the total, "gross" amount. Make sure that the income you report on this application has NOT been reduced to pay for taxes, insurance premiums or any other amounts taken from your pay.

Write a "0" in any fields where there is no income to report. Any income fields left empty or blank will also be counted as a zero. If you write '0' or leave any fields blank, you are certifying (promising) that there is no income to report. If local officials have known or available information that your household income was reported incorrectly, your application will be investigated.

Mark how often each type of income is received using the check boxes to the right of each field.

- A) Report total household size. Enter the total number of household members in the field "Total Household Members (Children and Adults)." This number MUST be equal to the number of household members listed in STEP 1 and STEP 3. If there are any members of your household that you have not listed on the application, go back and add them. It is very important to list all household members, as the size of your household affects your eligibility for free and reduced price meals.
- B) Provide the last four digits of your Social Security Number. An adult household member must enter the last four digits of their Social Security Number in the space provided.
- C) You are eligible to apply for benefits even if you do not have a Social Security Number. If no adult household members have a Social security Number, leave this space blank and mark the box to the right labeled "Check if no SSN."

# FOR EACH ADULT HOUSEHOLD MEMBER:

D) List all adult household member's name. Print the name of each household member in the boxes marked "Names of Adult Household Members (First and Last)." Do not list any household members you listed in STEP 1.

# Who should I list here?

When filling out this section, please include all adult members in your household who are:

Living with you and share income and expenses, even if not related and even if they do not receive income of their own.

### Do not include:

People who live with you but are not supported by your household's income AND do not contribute income to your household.

Children and students already listed in Step 1.

**Report earnings from work.** Refer to the chart below titled "Sources of Income for Adults" and report all income from work in the "Earnings from Work" field on the application. This is usually the money received from working at jobs. If you are self-employed or farm owner, you will report your net income. If you need assistance with this, ask your children's school for the Supplemental Worksheet which has self-employment calculations.

# What if I am self-employed?

If you are self-employed, report income from work as a **net** amount. This is calculated by subtracting the total operating expenses of your business from its gross receipts and revenue. Ask your school for a Supplemental Worksheet to assist you in determining your monthly gross annual income before deductions.

Report income from public assistance/child support/alimony. Refer to the chart below titled "Sources of Income for Adults" and report all income that applies in the "Public Assistance/Child Support/Alimony" field on the application. Do not report the value of any cash value public assistance benefits NOT listed on the chart. If income is received from child support or alimony, only report court-ordered payments. Informal but regular payments should be reported as "other" income in the next part. Report income from pensions/retirement/all other income. Refer to Table 2 below titled "Sources of Income for Adults" and report all income that applies in the "Pensions/Retirement/All Other Income" field on the application.

Table 1. 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)  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 housing, food and clothing	<ul> <li>Unemployment benefits</li> <li>Worker's compensation</li> <li>Supplemental Security Income (SSI)</li> <li>Cash assistance from State or local government</li> <li>Alimony payments</li> <li>Child support payments</li> <li>Veteran's benefits</li> <li>Strike benefits</li> </ul>	<ul> <li>Social Security (including railroad retirement and black lung benefits)</li> <li>Private Pensions or disability benefits</li> <li>Regular Income from trusts or estates</li> <li>Annuities</li> <li>Investment Income</li> <li>Earned interest</li> <li>Regular cash payments from outside household</li> </ul>

**E)** Report all income earned or received by children. Refer to the table below titled "Sources of Income for Children" and report the combined <u>gross income</u> for ALL children listed in Step 1 in your household in the box marked "Child Income." Only count foster children's income if you are applying for them with the rest of your household (income from a part-time job or from any funds provided to the child for the child's personal use). It is optional for the household to list foster children living with them as part of the household on an application for non-foster children.

### What is Child Income?

Child income is money received from outside your household that is paid **directly** to your children. Many households do not have any child income. Use the chart below to determine if your household has child income to report.

Sources of Child Income	Example(s)
Earnings from work	<ul> <li>A child has a regular full or part-time job where they earn a salary or wages. (Infrequent earnings, such as income from occasional babysitting or lawn mowing, are not counted as income.)</li> </ul>
<ul><li>Social Security</li><li>Disability Payments</li><li>Survivor's Benefits</li></ul>	<ul> <li>A child is blind or disabled and receives Social Security benefits.</li> <li>A parent is disabled, retired, or deceased, and their child receives social security benefits.</li> </ul>
<ul> <li>Income from person outside the household</li> </ul>	A friend or extended family member <i>regularly</i> gives a child spending money.
Income from any other source	A child receives regular income from a private pension fund, annuity, or trust.

# STEP 4: CONTACT INFORMATION AND ADULT SIGNATURE

All applications must be signed by an adult member of the household. By signing the application, that household member is promising that all information has been truthfully and completely reported. Before completing this section, please also make sure you have read the privacy and civil rights statements on the back of the application.

- A) Provide your contact information. Write your current address in the fields provided if this information is available. If you have no permanent address, this does not make your children ineligible for free or reduced price school meals. Sharing a phone number, email address, or both is optional, but helps us reach you quickly if we need to contact you.
- B) **B) Print and sign your name and write today's date.** Print the name of the adult signing the application and sign in the box labeled "Signature of adult completing the form."
- C) Mail or return completed form to: Pat Kelly, Monticello High School, 850 East Oak Street, Monticello, IA, 52310. Please do not mail completed form to the Department of Agriculture as this will delay processing.
- D) **D) Decline having your information released to Hawki**. If you do not want your household information shared with Hawki, **print, sign and date in the box provided.**
- E) **Obtaining translated applications**. If you need a translated application with instructions, they can be found in 49 languages at: <a href="https://www.fns.usda.gov/school-meals/translated-applications">https://www.fns.usda.gov/school-meals/translated-applications</a>.

# FREE/REDUCED APPLICATION - PG 1

2024-2025 lowa Application for Free and Reduced Price School Meals/Milk Complete one application per household. Use a pen (not a pencil). Please read "How to Apply for Free and Reduced Price School Meals" for more information on completing this application.

STEP 1	List ALL Househo	old Memb	ers who are in	fants, child	ren, and s	tudents u	p grade 12 (ii	more spaces	are required for a	List ALL Household Members who are infants, children, and students up grade 12 (if more spaces are required for additional names, attach the supplemental worksheet)	ch the supplementa	I worksheet)
Definition of Household  Member: "Anyone who is living		,		3	Date	Student			Foster Migrant,		OPTIONAL Responding to this section is optional and does not affect your children's elicibility for free/reduced price meals	ses not affect your rice meals.
with you and shares income and expenses, even if not	Child's First	<u>Z</u>	ວົ	Last	9 9		Child's	Grade	-	Ц	Race	ce
related." Children in Foster care and children who meet the definition of Homeless. Migrant	Name		Name	e C	Birth	Yes	School		Check all that apply	H=Hispanic or Latino N=Non- Hispanic/Latino	A=Asian W=White I=American IndianAlaskan Native B=Black/African American P=Native Hawaiian/Other Pacific Islander	N≐White v/Alaskan Native an American ither Pacific Islander
or Runaway are eligible for free meals. We are required to ask												
for information about your children's race and ethnicity.		,										
This information is important and helps to make sure we are												
fully serving our community.												
STEP 2 If No, g	Do any Household Members (including you) currently participate in one or more of the following assistance pro- If No, go to STEP 3. If you answered Yes, write a case number here then go to STEP 4 (Do not complete STEP 3)	nbers (inc ou answe	luding you) c red Yes, write	urrently par a case nur	ticipate ir nber here	one or n then go t	ore of the fo o STEP 4 (Do	llowing assi o not comple	stance programs te STEP 3).	Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, FIP or FDPIR? If No, go to STEP 3. If you answered Yes, write a case number here then go to STEP 4 (Do not complete STEP 3).	IR?	
Write only one case number in this space. Medicaid and EBT card numbers are NOT acceptable.	is space. Medic	aid and El	BT card numb	ers are <u>NO</u>	F accepta	ble.			Case Number:	er:	1. 1. 1.	
STEP 3 Report	Report Income for ALL Household Members (Skip this step if you answered 'Yes' to STEP 2)	TL Hous	ehold Memb	ers (Skip t	nis step if	you ans	wered 'Yes'	to STEP 2)	Apply Online:			
A. Total Number of All Household Members (Children + Adults)	hold Members	(Children	+ Adults)		B. Last (SSN)	Four Di	<b>gits of Soci</b> lousehold M	B. Last Four Digits of Social Security Number (SSN) of Adult Household Member (last 4 digits)		-xx-xxx	C. Check No SSN (adult):	No E):
D. All Adult Household Members (include yourself): List all Household Members not listed in STEP 1 even if they do not receive income from any source, write '0'. If you enter '0' or leave any fields blank, you are certifying (promising) that there is no income to report. Applications with blank income fields will be processed as complete. If more spaces are required for additional names, attach the supplemental worksheet. The sources of income for adults section will help you with the adult income. Report all income in whole dollar amounts before deductions or taxes.	(include yourse) ou are certifying ( olemental works	If): List all promising heet. The	Household Me ) that there is n sources of inc	mbers not listo income to one for adul	sted in ST report. Ap ts section	EP 1 ever plications will help y	if they do no with blank ind ou with the ad	ot receive ind come fields wi dult income. F	come. If they do nate of the processed as the processed a	ot receive income fro complete. If more s whole dollar amour	om any source, writ spaces are require its before deductio	e '0'. If you I <b>d for</b> ns or taxes.
Names of All Adult Household	old Gro	Gross Earnings fr	ıgs from Work	om Work/All Other Income	ешоэг		Gross P	Gross Public Assistance/Child Support/Alimony	nce/Child ny	Gros	Gross Pension/Retirement	nent
Wembers			How Often? (mark "X" in box)	mark "X" in bo	(x	1017-07-7		How Often? (r	How Often? (mark "X" in box)	e Lamada ya	How Often? (mark "X" in box)	t "X" in box)
First and Last Names. Include children who are temporarily away at school or in college.	who ege.	Weekly	Bi- weekly №	2x Monthly Month	thly Yearly	rly	Weekly	ily Bi- weekly	2x Monthly Month		Weekly Bi- weekly I	2x Month Monthly
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E. Child Income: Sometimes children in the household earn or receive income. Please include the TOTAL gross earned income by all Children listed in STEP 1 here. The	hildren in the ho	Susehold Children	earn or receilisted in STE	ve income. P 1 here. T	Please he		Income Rec	Total Income Received by All Children	_	How Offe Weekly Bi-weekly	How Offen? (mark "X" in box) -weekly 2x Month Monthly	t) nly Yearly
sources of income for children section will help you with the	section will help	you with	the Child Income.	ome.	١	S						
STEP 4 Conta	Contact Information and Adult	n and A	dult Signature	ure				PAGE	E TWO CONTAI	PAGE TWO CONTAINS MORE INFORMATION	MATION	
"I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and the may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws.	on on this applical am aware that if	tion is true I purpose	and that all ind ly give false inf	come is repo ormation, m	orted. I und y children I	lerstand th may lose	at this inform neal benefits	ation is given and I may be	in connection with prosecuted unde	that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and that school officials e false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws."	ral funds, and that s nd Federal laws." I	chool officials
I Signature of adult completing the form	the form				- - -	inted na	ne of adult	Printed name of adult completing the form	the form		Today	Today's Date
							_					
Street Address (if available)		Apt. #	City	1011	State	Zip	Dayti	Daytime Phone (optional)	optional)	Email (optional)	ial)	150 150 150 150 150 150 150 150 150 150
DO NOT WRITE BELOW THIS LINE. FOR SCHOOL ADMI	LINE. FOR SC	HOOL A	DMINISTRA	NISTRATIVE USE ONLY	ONLY	Return	complete	d form to:	Pat Kelly, 850 E Oa	st., Monticello, IA 5	2310 or pat.kelly@m	onticello.k12.ia.us
Household Size:	x52 Weekly	x26 Bi-Weekly	x24 y 2x Month	×12 ۱ Monthly	Yearly	ج	Total Income:	ome:	Application #:	ERROR PRO	NE APPLICAT	NO
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Signature and Effective Date of Determining Unicial Application     Income   Fost	Determining Oπicial ☐ Income ☐ Foster Child	Foster C		Signature and Date of Confirming Official DISINAP II Head Start (confirmation	or Confil		Signature and Date of Confirming Official  I FIP/SNAP I Head Start (Confirmation required)		Signature an	Signature and Date or Verification Follow-Up  Homeless/Migrant/Rinaway-I ocal Official confirmation Required	Ion Follow-Up	edilired
Eligibility Determination	☐ Free			eq pa		☐ Free Milk			Application Denied	☐ Incomplete	□ Over I	☐ Over Income Limits

# FREE/REDUCED APPLICATION - PG 2

Low-Cost Health Insurance for Children

must tell us by completing the information below. If you want further information, you may call Hawki at 1-800-257-8563. Also, if you are already receiving Medicaid or Hawki, please sign below. This f your children do not have health insurance, many families getting free or reduced price meals can also get free or low-cost health insurance for their children. The law requires public schools to share this information. Specifically, we will give them your child's name, your name and address. Medicaid and Hawki can only use the information to identify children who may be eligible for free or lowcost health insurance and contact you. They are not allowed to use the information from your free and reduced meal application for any other purpose or to share it with any other entity or program. You are not required to allow us to share this information, it will not affect your child's eligibility for free or reduced price meals. If you do NOT want your information shared with Medicaid or Hawki, you your free and reduced price meal eligibility information with Medicaid and Hawki, the State's medical insurance program for children. Private schools, RCCIs and childcare organizations may choose to will avoid another contact.

signature below indicates I DO NOT want school officials to share information from my free and reduced price meal application with Medicaid or Hawki.

Parent/Guardian Name (Printed)

Signature

your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of your child for free or reduced price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not submit all needed information, we cannot approve number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Family Investment Program (FIP) or Food Distribution Program on Indian

USDA Nondiscrimination Statement: 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

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 Program information may be made available in languages other than English. Persons with disabilities who require alternative means of JSDA through the Federal Relay Service at (800) 877-8339

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 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 AD-3027 form or letter must be submitted to USDA by:

\* mail:

Office of the Assistant Secretary for Civil Rights Washington, D.C. 20250-9410; or 1400 Independence Avenue, SW U.S. Department of Agriculture

\*Do not mail applications to this address, only

discrimination. complaints of

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(833) 256-1665 or (202) 690-7442;

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email 3

program.intake@usda.gov

This institution is an equal opportunity provider.

Translated applications are available at: http://www.fns.usda.gov/school-meals/translated-applications

Waiver Information

waiver of school fees. I understand that I will be releasing information that will show that I applied for free and reduced price school meals for my child(ren). I give up my rights to confidentiality for waiver of school fees ONLY. I certify that I am the parent/guardian of the child(ren) for whom application is being made. YOU DO NOT HAVE TO COMPLETE THIS WAIVER TO GET FREE OR REDUCED PRICE SCHOOL MEALS. Signature of Parent/quardian: If your child(ren) qualifies for free or reduced price meals, you may also be eligible for other benefits. If you sign this waiver, your child(ren) will be considered for a full or partial

Social Security (disability payments and survivor's Earnings from work benefits)

Sources of Child Income

- Income from person outside the household
- Income from any other source

d All Other Income (Adult Income Sources)	ment Social Security	Disability benefits	Regular income from trusts or estates	Annuities	Investment income	Rental income	Regular cash payments from outside household
Public Assistance/Alimony/Child Support (Adult Income Sources)	Cash Assistance from State/local government     Social Security	<ul> <li>Supplemental Security Income</li> </ul>	<ul> <li>Unemployment benefits</li> </ul>	<ul> <li>Worker's compensation</li> </ul>	<ul> <li>Alimony or child support payments</li> </ul>	<ul> <li>Veteran's benefits</li> </ul>	Strike henefite
Earnings from Work (Adult Income Sources)	<ul> <li>Salary, wages, cash bonuses (before deductions or taxes)</li> </ul>	<ul> <li>Net income from self-employment (farm or business)</li> </ul>	<ul> <li>If you are in the U.S. Military:</li> </ul>	a. Basic pay and cash bonuses (do NOT include combat	pay, FSSA or privatized housing allowances)	<ul> <li>b. Allowances for off-base housing, food and clothing</li> </ul>	

owa Non-Discrimination Statement: "It is owa Code section 216.6, 216.7, and 216.9. 50319-1004; phone number 515- 281-4121, If you have questions or grievances related to compliance with this policy by this CNP dentity, national origin, disability, age, or employment practices as required by the Rights Commission, Grimes State Office discriminate on the basis of race, creed building, 400 E. 14th St. Des Moines, IA Provider, please contact the lowa Civil color, sex, sexual orientation, gender the policy of this CNP provider not to religion in its programs, activities, or 800-457-4416; website:

Return completed form to: https://icrc.iowa.gov

Pat Kelly, Food Service Director pat.kelly@monticello.k12.ia.us Monticello, IA 52310 or 850 E Oak St, MCSD

# Optional Supplemental Worksheet 2024-2025 Iowa Application for Free and Reduced Price School Meals/Milk

Gross Annual Income + 12) **Gross Pension/Retirement** Self-employed persons may use income tax records for the preceding calendar year as a base to project the current year's net income, unless the current monthly income provides a as interest on home payments, medical expenses, and other similar non-business deductions are not allowed in reducing gross business income. Additional income from other kinds more accurate measure. Report income derived from the business venture less the operating costs incurred in the generation of that income. Deductions for personal expenses such business venture. The least income possible is zero (no income). The necessary information for arriving at allowable income from private business operation may be taken from your additional employment for which a salary was received, the income for purposes of applying for reduced price or free meals would be the income from the salary only. The loss from of employment must be treated as separate and apart from the income generated or lost from your business venture. For example, if you operated a business at a net loss, but held Race the business cannot be deducted from a positive income earned in other employment. For purposes of this application, it is not possible to report a negative income from any How Often? Any income earned by the above listed children should be included under Step 3 D on the first page of the application. Weekly This guidance will assist you in calculating the amount to report if you engage in farming, are self-employed or have income from other sources. Ethnicity Gross Annual Income Before Any Deductions. Report in Step 3 under All Other Income (Computed Monthly Income \$ 6 4 4 most recent U.S. Individual Income Tax Return - Form 1040 or 1040-SR and Schedule 1. Add together the amounts reported on the following lines: Gross Public Assistance/Child Support/Alimony How Often? (mark "X" in box) Homeless, Migrant, Runaway -oster Child Grade Self-Employment Income Calculations Child's School 4 \$ 8 6 9 Earnings from Work/All Other Income Student Rental real estate, royalties, partnerships, S corporations, trusts, etc. Schedule 1 Part 1, LINE 5 Monthly How Often? (mark "X" in box) Date of Birth 2x Month Additional Children in Your Household (not listed on page 1) Adults in Your Household (Not listed on page 1) Child's Last Name Gross | Business Income or (Loss) Schedule 1 Part 1, LINE 3 Capital Gain or (Loss) Form 1040 or 1040-SR, LINE 7 Other Gains or (Losses) Schedule 1 Part 1, LINE 4 Farm Income or (Loss) Schedule 1 Part 1, LINE 6 \$ \$ \$ \$ \$ \$ \$ Names of All Adult Household Members First and Last Names. Include children who are temporarily away at school or in college. Ξ Child's First Name Additional TOTAL

# Monticello Community School District, 850 E Oak Street, Monticello, Iowa 52310

Dr. Brian Jaeger, Superintendent

Phone: 319-465-3000 Fax: 319-465-6050 www.monticello.k12.ia.us



Providing rigorous, authentic, personalized learning, utilizing the local and global community.

Board of Education: Craig Stadtmiller, Mandy Norton, John Schlarmann, Mark Rieken, Tony Amsler