



## EAST RUTHERFORD PUBLIC SCHOOLS

### McKenzie School

125 Carlton Avenue

East Rutherford, NJ 07073

Phone: (201) 531-1235 ♦ Fax: (201) 531-1491

[www.erboe.net](http://www.erboe.net)

September 2019

Dear Parents/Guardians,

Welcome to the 2019-2020 East Rutherford Public School District, new this year is the procedure for the application of meals. All meal applications will be accessed through the Genesis System, the application will no longer be sent home with the student for this will provide each household confidentiality and efficient determinations. A new application must be completed **each year** if you would like to be considered for free/reduced lunch.

If you do not have access to the Genesis System you will need to contact the main office and provide the office with a valid email to utilize the Genesis System. The meal application will then be filled out online and is available in many different languages.

The meal applications and directions for the online application are also located on our website at [www.erboe.net](http://www.erboe.net) under the "For Families" tab for print out purposes if need be. If you are unable to print out the meal application contact the main office for assistance.

Thank you for your cooperation in this matter.

Sincerely,

Brian Barrow  
Principal

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SELECT STUDENT: 

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Today is 8/28/2019

Online Free and Reduced Meal Application

**MEAL APPLICATION STATUS**

No application has been submitted

**Apply**

Select Language ▼

Mobile

## Meal Application - Before you Begin

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

Please use these instructions to help you fill out the application for free or reduced price school meals. You only need to submit one application per household, even if your children attend more than one school in the district. The application must be filled out completely to certify your children for free or reduced price school meals. Please follow these instructions in order! Each step of the instructions is the same as the steps on your application. If at any time you are not sure what to do next, please contact your school.

#### 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 the school system, regardless of age.

A) Enter each child's name in the text box on the online meal application. If the child is not listed on the application use the "Add a Child" button to add them. Use one line of the application for each child.

B) Is the child a student in this school district? Mark 'Yes' or 'No' under the column titled "Student" to tell us which children attend the school district here. If you marked 'Yes,' 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 meets this description, mark the "Homeless, Migrant, Runaway" box next to the child's name and complete all steps of the application.

#### STEP 2: DO ANY HOUSEHOLD MEMBERS CURRENTLY PARTICIPATE IN SNAP, TANF, OR FDIPIR?

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) or NJ SNAP.
- Temporary Assistance for Needy Families (TANF) or NJ TANF/WorkFirst NJ.
- The Food Distribution Program on Indian Reservations (FDPIR).

A) If no one in your household participates in any of the above listed programs:

- Leave STEP 2 blank and go to STEP 3.

B) If anyone in your household participates in any of the above listed programs:

- Write a case number for SNAP, TANF, or FDPIR. You only need to provide one case number. If you participate in one of these programs and do not know your case number, contact your local county welfare agency: <http://www.nj.gov/humanservices/dfd/programs/njsnap/cwafindex.html>
- Go to STEP 4.

#### STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

How do I report my income?

- Use the charts titled "Sources of Income for Adults," and "Sources of Income for Children," provided on the first screen of this application and/or the attachment titled "More Information" uploaded to this application at the agreement to terms and services section, to determine if your household has income to report.
- Report all amounts in GROSS INCOME ONLY. Report all income in whole dollars. Do not include cents.
  - o Gross income is the total income received before taxes.
  - o 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 suspect 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.

##### 3.A. REPORT INCOME EARNED BY CHILDREN

A) Report all income earned or received by children. Report the combined gross income 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 together with the rest of your household.



## Parents at East Rutherford School District

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.

### 3.B REPORT INCOME EARNED BY ADULTS

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 they are 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.
- Infants, Children and students already listed in STEP 1.

B) List adult household members' names. Input 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. If a child listed in STEP 1 has income, follow the instructions in STEP 3, part A.

C) Report earnings from work. 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 a self-employed business or farm owner, you will report your net income.

What if I am self-employed? Report income from that work as a net amount. This is calculated by subtracting the total operating expenses of your business from its gross receipts or revenue.

D) Report income from public assistance/child support/alimony. Report all income that applies in the "Public Assistance/Child Support/Alimony" field on the application. Do not report the cash value of any 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.

E) Report income from pensions/retirement/all other income. Report all income that applies in the "Pensions/Retirement/ All Other Income" field on the application.

F) Verify total household size. This number is automatically calculated based on information entered but please make sure that the number is correct. 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.

G) Provide the last four digits of your Social Security Number. By providing the last four digits of your Social Security Number, you are certifying the application and it acts as your signature. An adult household member must enter the last four digits of their Social Security Number in the space provided. 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."

#### STEP 4: CONTACT INFORMATION AND ADULT SIGNATURE

All applications must be signed by an adult member of the household by providing the last four digits of their Social Security Number. 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 included below towards the end of this document.

A) Provide/Verify your contact information. 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. If you need to update your address, phone number or e-mail address, please contact the main office of the appropriate school.

B) By providing the last four digits of your Social Security Number, you are signing this application and the date and time will be recorded at the time of submittal.

C) Submit Completed Form to your School or District through the parent portal.

D) Share children's racial and ethnic identities (optional). On the application, we ask you to share information about your children's race and ethnicity. This field is optional and does not affect your children's eligibility for free or reduced price school meals.

#### FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED PRICE SCHOOL MEALS

Dear Parent/Guardian:

Children need healthy meals to learn. EAST RUTHERFORD BD OF ED offers healthy meals every school day at the prices listed below. Your children may qualify for free meals or for reduced price meals.

FULL PRICE	Elementary	Middle	High
Lunch	\$3.25	\$3.25	N/A
Breakfast	\$1.75	\$1.75	N/A
After School Snack	N/A	N/A	N/A
Special Milk	N/A	N/A	N/A
Split Session Milk Program	N/A	N/A	N/A
REDUCED PRICE	Elementary	Middle	High
Lunch	\$0.40	\$0.40	N/A
Breakfast	\$0.30	\$0.30	N/A
After School Snack	N/A	N/A	N/A
Special Milk	N/A	N/A	N/A
Split Session Milk Program	N/A	N/A	N/A

This packet includes an application for free or reduced price meal benefits, and a set of detailed instructions. For a convenient way to fill out the meal application, log into your Genesis Parent Portal Account. For more information and a link to the paper based form visit <https://www.fns.usda.gov/school-meals/applying-free-and-reduced-price-school-meals>

## Parents at East Rutherford School District

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 **NJ SNAP** or **NJ TANF/WorkFirst-NJ** are eligible for free 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 within the limits on the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced price meals if your household income falls at or below the limits on this chart.

### FEDERAL ELIGIBILITY INCOME CHART For School Year 2019-2020

Household Size	Yearly	Monthly	Weekly
1	23,107	1,926	445
2	31,284	2,607	602
3	39,461	3,289	759
4	47,638	3,970	917
5	55,815	4,652	1,074
6	63,992	5,333	1,231
7	72,169	6,015	1,388
8	80,346	6,696	1,546
Each Additional Person:	8,177	682	158

2. **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 call or e-mail your school, homeless liaison or migrant coordinator.
3. **DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD?** No. Use one Free and Reduced Price School Meals Application for all students in your household. We cannot approve an application that is not complete, so be sure to fill out all required information. Submit the completed application on the parent portal under "Forms".
4. **SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE MEALS?** No, but please read the letter you got carefully and follow the instructions. If any children in your household were missing from your eligibility notification, contact your school immediately.
5. **CAN I APPLY ONLINE?** Yes, you are encouraged to complete an online application instead of a paper application. The online application has the same requirements and will ask you for the same information as the paper application. Contact your school if you have any questions about the online application.
6. **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. You must send in a new application unless the school told you that your child is eligible for the new school year. If you do not send in a new application that is approved by the school or you have not been notified that your child is eligible for free meals, your child will be charged the full price for meals.
7. **I GET WIC. CAN MY CHILDREN GET FREE MEALS?** Children in households participating in WIC may be eligible for free or reduced price meals. Please send in an application.
8. **WILL THE INFORMATION I GIVE BE CHECKED?** Yes. We may also ask you to send written proof of the household income you report.
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 and reduced price meals if the household income drops below the income limit.
10. **WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION?** You should talk to school officials. You also may ask for a hearing by calling or writing to: Giovanni A. Giancaspro, 100 Uhland Street, 201-804-3100 x 1002, ggiancaspro@erboe.net.
11. **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.
12. **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.
13. **WHAT IF SOME HOUSEHOLD MEMBERS HAVE NO INCOME TO REPORT?** Household members may not receive some 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.
14. **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, 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.
15. **WHAT IF THERE ISN'T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY?** List any additional household members in the application by clicking the "Add Another Household Member" button and providing their names.
16. **MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR?** To find out how to apply for NJ SNAP or other assistance benefits, contact your local assistance office or call 1-800-687-9512 or go to <https://oneapp.dhs.state.nj.us/default.aspx>. You can also contact NJ Family Care or Medicaid at 1-800-701-0710 or [www.njfamilycare.org](http://www.njfamilycare.org) for information regarding health insurance for your family. For the WIC Program, call 1-800-328-3838 or go to [www.nj.gov/health/fhs/wic](http://www.nj.gov/health/fhs/wic).

If you have other questions or need help, call 201-804-3100 x 2001.

Sincerely,

Lameka Augustin  
School Business Administrator



## Parents at East Rutherford School District

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, 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 last four digits of 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), Temporary Assistance for Needy Families (TANF) Program 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 program rules.

In accordance with 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, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

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 Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made 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](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:

mail: U.S. Department of Agriculture


Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW  
Washington, D.C. 20250-9410

fax: (202) 690-7442; or

email: [program.intake@usda.gov](mailto:program.intake@usda.gov).

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SELECT STUDENT:

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APPLICATION - 2 - CHILDREN

APPLICATION - 3 - INCOME

APPLICATION - 4 - SUMMARY

## Meal Application

### Students in Household

STUDENT	GRADE	SCHOOL	FOSTER	HOMELESS	IMMIGRANT	RUNAWAY	IS IN HOUSEHOLD
[REDACTED]	[REDACTED]	[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

### Other Children in Household

NAME	FOSTER	HOMELESS	IMMIGRANT	RUNAWAY
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Add a Child

### Children's Racial and Ethnic Identities

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. Responding to this section is optional and does not affect your children's eligibility for free or reduced price meals.

#### Ethnicity

Hispanic or Latino: ☐

Not Hispanic or Latino: ☐

#### Choose one or more race (regardless of ethnicity)

Asian: ☐

Black or African American: ☐

American Indian or Alaskan Native: ☐

Native Hawaiian or Other Pacific Islander: ☐

White: ☐

### Assistance Program Participation

Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF, FDPIR?

If Yes, enter Case Number here:

Additional information for your school district:

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SELECT STUDENT:

[REDACTED]

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APPLICATION - 3 - INCOME

APPLICATION - 4 - SUMMARY

## Meal Application Income

For each household member that earns or receives income, enter the amount along with how often it is received.

## Students in Household

Sometimes children in the household earn or receive income. Please include the income received by each student in the household. 

STUDENTS INCLUDED IN APPLICATION

INCOME FREQUENCY


[REDACTED] \$ 0.00 [v]

## All Other Household Members (including non-earners)

NAME

WORK 

WORK 2

ASSISTANCE OTHER 

INCOME FREQUENCY

INCOME FREQUENCY

INCOME FREQUENCY

INCOME FREQUENCY

[REDACTED]

\$ 0.00 [v]

\$ 0.00 [v]

\$ 0.00 [v]

\$ 0.00 [v]

Add Another Household Member

## Household Size

Household size is an important part of determining free and reduced lunch status. The number below should reflect the number of household members that have been entered on this application. Please review the number and make sure it is correct. If it is not correct, please review the household members that have been entered above. For non-student household members, clearing the member's name above will remove them from being counted in household size.

Total Household Members (Adults and Children):

1

A household is defined as a group of people, related or unrelated, that usually live together and share income and expenses. This includes grandparents or other extended family members that are living with you. It also includes people that are not currently living with you, but are only away on a temporary basis, like kids that are away at college. It includes people regardless of age or whether they earn or receive income.

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SELECT STUDENT:

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APPLICATION - 3 - INCOME

APPLICATION - 4 - SUMMARY

## Meal Application Summary

## Students

STUDENTS INCLUDED IN APPLICATION

FOSTER

HOMELESS

INDEBT

RUNAWAY

No

No

No

No

## Assistance Program Participation

Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF? No

Case Number:

## Household Income

NAME

1

WORK

WORK2

ASSISTANCE

OTHER

COMBINED

INCOME FREQUENCY INCOME FREQUENCY INCOME FREQUENCY INCOME FREQUENCY INCOME FREQUENCY

## Non-Students

[REDACTED]

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00 Annually

## Students

[REDACTED]

\$0.00

\$0.00 Annually

Total:

\$0.00 Annually

## Household Size

Total Household Members (Adults and Children): 2

## Children's Racial and Ethnic Identities

Hispanic or Latino: No

Asian: No

Black or African American: No

American Indian or Alaskan Native: No

Native Hawaiian or Other Pacific Islander: No

White: No

## Certify and Submit:

Sign by entering the last four digits of your Social Security Number:

[REDACTED]

Or, check here to indicate you do not have a Social Security Number:

☐

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 that school officials 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.

Check this box to certify: ☒

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Submit

8. Once the application is submitted, the parent will see that the application is pending.

