

**FREE/REDUCED MEAL APPLICATION**  
**LIFE SCHOOL OF DALLAS 2024-2025**

**Only fill out one form per household.**

We will be scanning the forms on a computer. Please write neat and legible or it may delay processing your application.

You **MUST** use **BLACK** ink.

Please complete all necessary information, including your signature or it will delay processing your application.

In order for your child/children's benefits to start as quickly as possible, please complete and return it to your **child's school lunch coordinator** immediately.

**(DO NOT FOLD)**

Thank you,  
Life School of Dallas  
Child Nutrition Department

## Life School

Dear Parent/Guardian:

Children need healthy meals to learn. *Life School* offers healthy meals every school day. Breakfast costs **\$1.65**; lunch costs **\$3.20**. **Your children may qualify for free meals or for reduced-price meals.** Reduced-price is **\$.30** for breakfast and **\$.40** for lunch. If you received a notification letter that a child is directly certified for free meals, do not complete an application. Let the school know if any children in the household attending school are not listed in the letter.

The questions and answers that follow and attached directions provide additional information on how to complete the application. Complete only one application for all the students in the household and return the completed application to

<b>Life School Carrollton (K-6):</b> <u>Ed Perry, 2660 E. Trinity Mills Rd., Carrollton, TX 75006, 469-701-1355</u>	<b>Life School Cedar Hill (K-6)</b> <u>Ashley Mayben, 129 West Wintergreen, Cedar Hill, TX 75104, 972-293-2825</u>	<b>Life School Lancaster (K-6)</b> <u>Teresa Rutkowski, 950 S. I-35 E., Lancaster, TX 75146, 972-274-7950</u>
<b>Life School Mountain Creek (K-8)</b> <u>Cassandra Puente, 5525 W. Illinois Ave., Dallas, TX 75211, 214-623-0012</u>	<b>Life School Oak Cliff (K-6)</b> <u>Mari Williams, 4400 S. R.L. Thornton Fwy., Dallas, TX 75224, 214-376-8200</u>	<b>Life School Oak Cliff (7-12)</b> <u>Catrina Goffney, 4400 S. R.L. Thornton Fwy., Dallas, TX 75224, 214-413-1612</u>
<b>Life School Red Oak (K-6)</b> <u>Irina Rodriguez, 777 S. I-35 E., Red Oak, TX 75154, 469-552-9200</u>	<b>Life Middle School Waxahachie (7-8)</b> <u>Winona Toumbs, 3295 Hwy 77, Waxahachie, TX 75165, 972-937-0715</u>	<b>Life High School Waxahachie (9-12)</b> <u>Katherine Lopez, 170 W. Butcher Rd., Waxahachie, TX 75165, 469-708-4444</u>

**Director of State and Federal Programs:** Kay Bateman, 132 E. Ovilla Rd, Suite A, Red Oak, TX 75154, 469-850-5433, ext 7262

If you have questions about applying for free or reduced-price meals [*see contact list above*].

### 1. Who Can Get Free Meals?

- **Income**—Children can get free or reduced-price meals if a household's gross income is within the limits described in the *Federal Income Eligibility Guidelines*.
- **Special Assistance Program Participants**—Children in households receiving benefits from the Supplemental Nutrition Assistance Program (SNAP), Food Distribution Program on Indian Reservations (FDPIR), or Temporary Assistance for Needy Families (TANF), are eligible for free meals.
- **Foster**—Foster children who are under the legal responsibility of a foster care agency or court are eligible for free meals.
- **Head Start, Early Head Start, and Even Start**—Children participating in these programs are eligible for free meals.
- **Homeless, Runaway, and Migrant**—Children who meet the definition of homeless, runaway, or migrant qualify for free meals. If you haven't been told about a child's status as homeless, runaway, or migrant or you feel a child may qualify for one of these programs, please call or email Susan Boggs at 469-850-5433 ext 7237 or [susan.boggs@lifeschools.net](mailto:susan.boggs@lifeschools.net).
- **WIC Recipient**—Children in households participating in WIC may be eligible for free or reduced-price meals.

### 2. What If I Disagree with the School's Decision About My Application?

Talk to school officials. You also may ask for a hearing by calling or writing to Megan Beck at 469-850-5433 ext 7261, 132 E. Ovilla Rd., Red Oak, TX 75154.

### 3. My Child's Application Was Approved Last Year. Do I Need To Fill Out A New One?

Yes. An application is only good for that school year and for the first few days of this school year. Send in a new application unless the school has told you that your child is eligible for the new school year.

4. **If I Don't Qualify Now, May I Apply Later?** Yes. Apply at any time during the school year. A child 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.

5. **What If My Income Is Not Always the Same?** List the amount normally received. If a household member lost a job or had hours/wages reduced, use current income.

6. **We Are in The Military. Do We Report Our Income Differently?** Basic pay and cash bonuses must be reported as income. Any cash value allowances for off-base housing, food, or clothing, or Family Subsistence Supplemental Allowance payments count as income. If housing is part of the Military Housing Privatization Initiative, do not include the housing allowance as income. Any additional combat pay resulting from deployment is excluded from income.

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 Application Information Be Checked?** Yes. We may also ask you to send written proof of the reported household income.

9. **My Family Needs More Help. Are There Other Programs We Might Apply For?** To find out how to apply for other assistance benefits, contact your local assistance office or 2-1-1.

10. **Can I Apply Online?** Yes! The online application has the same requirements and will ask you for the same information as the paper application. Visit <http://lifeschool.schoollunchapp.com> to begin or to learn more about the online application process. Contact *Kay Bateman, 469-850-5433 ext 7262, 132E. Ovilla Rd, Suite A., Red Oak, TX 75154, [kay.bateman@lifeschools.net](mailto:kay.bateman@lifeschools.net)* if you have questions about the online application.

If you have other questions or need help, call

<b>Life School Carrollton (K-6):</b> <u>Ed Perry, 2660 E. Trinity Mills Rd., Carrollton, TX 75006, 469-701-1355</u>	<b>Life School Cedar Hill (K-6)</b> <u>Ashley Mayben, 129 West Wintergreen, Cedar Hill, TX 75104, 972-293-2825</u>	<b>Life School Lancaster (K-6)</b> <u>Teresa Rutkowski, 950 S. I-35 E., Lancaster, TX 75146, 972-274-7950</u>
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Si necesita ayuda, por favor llame al teléfono: [*see contact list above*].

Sincerely,

*Ed Perry, Ashley Mayben, Teresa Rutkowski, Cassandra Puente, Mari Williams, Catrina Goffney, Irina Rodriguez, Winona Toumbs, and Katherine Lopez*

# 2024 - 2025 LIFE SCHOOL OF DALLAS FREE AND REDUCED PRICE SCHOOL MEALS FAMILY APPLICATION

Please check if any student listed below is new to the district

PLEASE REFER TO INSTRUCTIONS ON BACK. COMPLETE ONE APPLICATION PER HOUSEHOLD. USE BLACK INK, PRINT WITHIN BOXES.

Carrollton Elementary K-5  
  Cedar Hill Elementary K-6  
  Lancaster Elementary K-6  
  Mountain Creek Elementary K-8  
  Oak Cliff Elementary K-6  
  Oak Cliff Secondary 7-12  
  Red Oak Elementary K-6  
  Life Middle School Waxahachie  
  Life High School Waxahachie

## Part 1 List ALL Household Members who are infants, children, and students up to and including grade 12.

Student ID (Optional)	First Name	MI	Last Name	Date of Birth MM DD YY	Grade	Student Income	Frequency				Programs				
							Weekly	Bi-Weekly	2x Monthly	Monthly	Annually	Foster Child	Homeless	Migrant	Runaway
						\$					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						\$					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						\$					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						\$					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						\$					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Put an X in the appropriate box, if a child participates in any one of the following programs. If ALL children participate in at least one of these programs go to part 4. If only some go to part 2.

Check all that apply

## Part 2 Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF, or FDIPIR?

If No, go to Step 3.  
 If yes > Write the Eligibility Determination Group Number (EDG) in this space  skip Step 3, and go to Step 4

## Part 3 Report Income for ALL Adult Household Members (Skip this step if you entered an EDG number in Step 2).

### Income for Adult Household Members (Including Yourself)

List all Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they do receive income, report total income (without deductions) for each source in whole dollars only. Indicate the frequency of income: W=Weekly, E=Every 2 Weeks, T=Twice per Month, M=Monthly, A=Annually. 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.

Print First and Last Name	Work Earnings	Choose one	Public Assistance, Child Support, Alimony	Choose one	Pensions, Retirement, Social Security, SSI, or VA Benefits	Choose one	All Other Income	Choose one
	\$							
	\$							
	\$							
	\$							
	\$							
	\$							
	\$							

TOTAL HOUSEHOLD MEMBERS (Children & Adults)  Last 4 Digits of Social Security Number (SSN) of Household Member Completing This Form: ---  Check if NO SSN

## Part 4 Provide Contact Information and Adult Signature.

I certify (promise) that all information on this application is true and that all income is reported. I understand that the school will get federal funds based on the information I give. I understand that school officials may verify (check) the information. I understand that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted.

Mailing Address/Apt number  City  State  Zip Code

Email Address (Optional)  Daytime Phone Number (Optional)

Print Adult First Name  Print Adult Last Name  Signature of Adult Completing the Form  Today's Date

PLEASE RETURN TO CHILD'S SCHOOL LUNCH COORDINATOR or Mail to: 132 East Ovilla Rd., Suite A, Red Oak, TX 75154

### Do Not Fill Out This Part. This Is For School Use Only

Multiple income frequencies must be converted to annual amounts and combined to determine household income. Do not convert if only one income frequency is provided by the household. If converting income to annual, round only the final number-Annual Income Conversion: Weekly x 52 | Every 2 Weeks x 26 | Twice a Month x 24 | Monthly x 12

Household Size:   Categorical Eligibility Total Income:  Per  Week  Every 2 Weeks  Twice a month  Monthly  Annually

Reviewing/Determining Official's Signature:  Date:

Confirming Official's Signature:  Date:

Follow-Up Official's Signature:  Date:

Date Received:

Eligibility  Free  Reduced  Denied

Date Withdrawn:

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, 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: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf> 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: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; or (2) fax: (833) 256-1665 or (202) 690-7442; or (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov). This institution is an equal opportunity provider.