

## Food Service

### Welcome Back to School Newsletter

Greetings,

We would like to extend a warm welcome to the Nashua community from your School Food and Nutrition Services Department! Our mission is to alleviate childhood hunger within the community and increase student success by providing and promoting a nutritionally balanced diet in a warm and friendly environment.

We are sensitive to the various nutritional needs of our students. If your child has an allergy to any food, please contact your school nurse.

**\*NO APPLICATION IS NECESSARY IF YOU HAVE RECEIVED NOTIFICATION THAT YOUR CHILDREN HAVE BEEN DIRECTLY CERTIFIED FOR THE UPCOMING 2025/2026 SCHOOL YEAR.**

### Meal Prices 2025–2026 School Year

#### Breakfast

Elementary Full Price \$1.50  
Middle Full Price \$1.75  
High Full Price \$2.00  
All Schools Reduced Price \$0.00

#### Milk Only

All Schools \$0.75

Please note all second meals are charged at the full "Paid Price" for all students regardless of status.

#### Lunch

Elementary Full Price \$2.75  
Middle Full Price \$3.00  
High Full Price \$3.25  
All Schools Reduced Price \$0.40

**Apply for meal benefits online from the privacy of your home, or anywhere with an internet connection. Visit**

**[www.MySchoolApps.com](http://www.MySchoolApps.com)**.



**Breakfast & Lunch Menus are available online at <https://www.nashua.edu/Page/716>**

### Student Meal Account Payment Options

- Sending cash or check in with your student(s) to the school in a sealed envelope,
  - (Please make checks payable to NSD Food Service and be sure to include your student(s) name and ID number in notes field)
- Online at [MySchoolBucks.com](http://MySchoolBucks.com) (DEPOSIT TRANSACTION FEES APPLY TO ALL ONLINE PAYMENTS)

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Food Service Department  
36 Riverside Drive  
Nashua, New Hampshire 03062

Krystal De Gray  
Chief Operating Officer

Mary Benoit  
Director, Food Service  
PHONE: 603-966-1303  
FAX: 603-966-1304  
[www.nashua.edu/district/](http://www.nashua.edu/district/)

### SCHOOL YEAR 2025-2026

#### FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED-PRICE SCHOOL MEALS UNDER THE UNITED STATES DEPARTMENT OF AGRICULTURE (USDA) NATIONAL SCHOOL LUNCH PROGRAM (NSLP)

Dear Parent/Guardian: Nashua School District offers healthy meals every school day under the USDA National School Lunch Program. Nashua School District has priced meals at costs **\$1.50 for Elementary Schools, \$1.75 for Middle Schools, \$2.00 for High Schools: lunch costs \$2.75 for Elementary Schools, \$3.00 for Middle Schools, \$3.25 for High Schools.** Your children may qualify for free meals or for reduced-price meals under this program. If your household qualifies for reduced-priced meals, Breakfast would be at no cost and lunch would be priced at \$0.40. Below are some common questions and answers to aid in the process of determining your child's eligibility.

1. WHO CAN GET FREE OR REDUCED PRICE MEALS?

- All children in households receiving benefits from **NH SNAP** or **NH TANF**, 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 set by the Federal Income Eligibility Guidelines in the chart below.

#### Income Guidelines for Child Nutrition Programs: July 1, 2025, to June 30, 2026

Household size	Annual	Monthly	Twice per month	Every two weeks	Weekly
1	28,953	2,413	1,207	1,114	557
2	39,128	3,261	1,631	1,505	753
3	49,303	4,109	2,055	1,897	949
4	59,478	4,957	2,479	2,288	1,144
5	69,653	5,805	2,903	2,679	1,340
6	79,828	6,653	3,327	3,071	1,536
7	90,003	7,501	3,751	3,462	1,731
8	100,178	8,349	4,175	3,853	1,927
For each additional family member, add	10,175	848	424	392	196

2. HOW DO I KNOW

IF MY

CHILD(REN) 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 **Robert Cioppa, [CioppaR@nashua.edu](mailto:CioppaR@nashua.edu), 603-966-1068**

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. Return the completed application to: **Doreen Burgess, 36 Riverside Street, Nashua NH 03062 603-966-1302, [burgessd@nashua.edu](mailto:burgessd@nashua.edu).**

Updated 6/2025

4. SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILD(REN) 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 **Doreen Burgess, 36 Riverside Street, Nashua NH 03062 603-966-1302, [burgessd@nashua.edu](mailto:burgessd@nashua.edu) immediately.**
5. CAN I APPLY ONLINE? Yes! You are encouraged to complete an online application instead of a paper application if you are able. The online application has the same requirements and will ask you for the same information as the paper application. Visit <https://www.nashua.edu/Page/716> to begin or to learn more about the online application process. Contact **Doreen Burgess, 36 Riverside Street, Nashua NH 03062 603-966-1302, [burgessd@nashua.edu](mailto:burgessd@nashua.edu)** if you have any questions about the online application.
6. MY APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT A NEW ONE? Yes. The 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 has informed you that your child is eligible for the new school year.
7. I GET WIC. CAN MY CHILD(REN) GET FREE MEALS? Children in households participating in WIC may be eligible for free or reduced-price meals. Please apply for meals through the income 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: **Robert Cioppa , at 141 Ledge Street Nashua NH 03060, 603-966-1068 [CioppaR@nashua.edu](mailto:CioppaR@nashua.edu)**
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 zero. 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 bonus 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.
15. WHAT IF THERE ISN'T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY? List any additional household members on a separate piece of paper and attach it to your application. **Doreen Burgess, 36 Riverside Street, Nashua NH 03062 603-966-1302, [burgessd@nashua.edu](mailto:burgessd@nashua.edu)** to receive a second application.
16. MY FAMILY NEEDS MORE HELP, ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for **SNAP, TANF, FDPIR** or other assistance benefits, contact your local assistance office or call **603 271-9700 or 844-275-3447**.

If you have other questions or need help, call **Doreen Burgess 603-966-1302**

Sincerely,

*Mary Benoit*

Mary Benoit, Food Service Director

*USDA is an equal opportunity provider, employer and lender.*

Updated 6/2025

## USDA Nondiscrimination Statement | Food and Nutrition Service

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.

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# How To Apply for Free and Reduced Price School Meals

Please use these instructions to help you fill out the application for free and reduced price school meals. You only need to submit one application per household, **even if your children attend more than one school in the**

The application must be filled out completely to determine the eligibility of your child(ren) 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

**Please use a pen (not a pencil) when filling out the application and do your best to print clearly.**

## Step 1: List ALL children, infants, and students up to and including grade 12

Tell us how many infants/toddlers, children not in school, and elementary/middle/high 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 formal foster arrangement through a court or state/local agency, or qualify as homeless, migrant, or runaway youth;
- Students attending (regardless of age)

<p><b>A) List each child's name.</b> Print each child's name. Use one line of the application for each child. When printing names, write one letter in each box. Stop if you run out of space. If there are more children present than lines on the application, attach a second piece of paper (or a second application if completing electronically) with all required information for the additional children. This also applies to adults in Step 3. "MI" is short for middle initial. Print the first letter of each child's middle name in the box.</p>	<p><b>B) Is the child a student?</b> If "Yes," write the grade level of the student in the "Grade" column to the right.</p>	<p><b>C) Do you have any foster children?</b> 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 <b>Step 1</b>, go to <b>Step 4</b>.  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. Note: Adopted children are not considered foster children. A foster child is a minor child who has been taken into state custody and placed with a state-licensed adult, who cares for the child in place of their parent or guardian.</p>	<p><b>D) Are any children homeless, migrant, or runaway?</b> 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. Homeless, Migrant, Runaway status must be confirmed with the appropriate program staff. If the school district cannot confirm your student's homeless, migrant, or runaway status, then the school district will contact you to complete an income-based application. <u>You may choose to provide income information now in order to prevent the school district from potentially needing to contact you later.</u></p>
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Step 2: Do any household members currently participate in SNAP, TANF, 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: <ul style="list-style-type: none"><li>• The Supplemental Nutrition Assistance Program (SNAP) or</li><li>• Temporary Assistance for Needy Families (TANF) or</li><li>• The Food Distribution Program on Indian Reservations (FDPIR).</li></ul>	
A) If no one in your household participates in any of the above listed programs: <ul style="list-style-type: none"><li>• Check "No" in Step 2 and go to Step 3.</li></ul>	B) If anyone in your household participates in any of the above listed programs: <ul style="list-style-type: none"><li>• 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:<ul style="list-style-type: none"><li>• Go to Step 4.</li></ul></li></ul>

Step 3: List ALL household members and income for each member
How do I report my income? <ul style="list-style-type: none"><li>• Use the lists titled "<u>Sources of Income</u>" &amp; "<u>Examples of Income for Children</u>," on the back side of the application form to determine if your household has income to report.</li><li>• Report all amounts in GROSS INCOME ONLY. Report all income in whole dollars. Do not include cents.<ul style="list-style-type: none"><li>○ Gross income is the total income received <b>before</b> taxes and deductions.</li><li>○ 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.</li></ul></li><li>• 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.</li><li>• Mark how often each type of income is received using the check boxes to the right of each field.</li></ul>
3.A. Report income earned by adults
Who should I list here? <ul style="list-style-type: none"><li>• When filling out this section, please include ALL adult members in your household who are living with you and share income and expenses, <u>even if they are not related and even if they do not receive income of their own</u>.</li><li>• <b>Do NOT include:</b><ul style="list-style-type: none"><li>○ People who live with you but are not supported by your household's income AND do not contribute income to your household.</li><li>○ Infants, children and students already listed in Step 1.</li></ul></li></ul>



## Step 3: List ALL household members and income for each member

### 1) List adult household members' names.

Print the name of each household member in the boxes marked "Names of Adult Household Members (First and Last)." Include college students, unless they are declared independently on taxes (all college students are considered adults). Do not list any household members you listed in Step 1.

### 2) List earnings from work.

List 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. Net income is your income after taxes and deductions have been subtracted.

- **What if I have multiple jobs?** List each job separately by entering your name and income from each job on a new line. Add an additional sheet of paper if necessary.
- **What if I am self-employed?** List income from your business as a net amount. This net amount is calculated by subtracting the total operating expenses of your business from its gross receipts (revenue). Gross receipts or revenue are all the income earned from the sale of any products or services offered.

If a child listed in **Step 1** has income, follow the instructions in **Step 3, Part B.**

### 3) List income from public assistance/child support/alimony.

List 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.

### 4) List income from pensions/retirement/all other income.

List all income that applies in the "Pensions/Retirement/All Other Income" field on the application.

- **What if I receive income from multiple sources in this category?** List each source separately by entering your name and income from each source on a new line. Add an additional sheet of paper if necessary.

### 5) List 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.

### 6) 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. 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 Social Security Number."

## 3.B List income earned by children

### List all income earned or received by children.

List 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.

- **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.

<b>Step 4: Contact information and adult signature</b>		
<i>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 statements on the back of the application.</i>		
<b>A) Provide your contact information.</b> Write your current mailing address in the fields provided, if this information is available. If you have no permanent address, that is okay. 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.</b> Print the name of the adult signing the application and that person signs in the box "Signature of adult."	<b>C) Mail completed application to:</b>
<b>Optional</b>		
<b>Share children's racial and ethnic identities (optional).</b> On the back of 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. This information is requested solely for the purpose of determining the State's compliance with Federal civil rights laws, and your response will not affect consideration of your application, and may be protected by the Privacy Act. By providing this information, you will assist us in assuring that this program is administered in a nondiscriminatory manner.		

**Please return the application directly to your child's SCHOOL. DO NOT mail, fax, or email completed applications or questions about applications to the USDA Office of the Assistant Secretary for Civil Rights or your child's eligibility for free or reduced-price meals will be delayed.**

### SCHOOL LUNCH PROGRAM MEAL CHARGES

The Nashua School District (the District) encourages all parents/guardians to provide a healthy breakfast and lunch for their student(s). Parents are welcome to send students to school with a "brown bag/lunch box" meal. The District provides the opportunity to purchase breakfast and lunch from the school cafeteria. Each meal meets or exceeds the federal nutrition standard. Payment is expected no later than when the meal is served. Payment may be in cash, check or as a debit against funds deposited into the student lunch account.

The school lunch program is required by federal law to operate as a non-profit which must end each fiscal year without a negative balance. Uncollected debt must be paid to the school lunch program from other funds. Therefore, parents are required to pay the full or reduced price for meals. The District's policy is to quickly escalate efforts to bring student meal accounts into positive balance, to avoid circumstances where these accounts build significant debt.

#### Student Meal Accounts

NSD uses a point-of-sale (POS) computerized meal payment system which has an account for all students. Parents/guardians using the POS system are required to establish and maintain a positive balance in the student's meal account.

Funds may be deposited into a student lunch account by cash, check, or on-line payment. Checks should be made out to: Nashua School District Food Service. Payments should be presented to the kitchen cashier, the Main Office, or the Food Service Office. A check may also be mailed to: Food Service-Nashua School District, 36 Riverside Street, Nashua, NH 03062. The District utilizes MYSCHOOLBUCKS, [www.myschoolbucks.com](http://www.myschoolbucks.com), as an on-line payment vendor where parents/guardians securely fund student accounts. The use of checks or on-line payments are encouraged, as each provides a record. Parents are responsible for any fees charged by the on-line service. In accordance with United States Department of Agriculture ("USDA") guidance SP 02-2015, there will be no processing fee for deposits to a student meal account made by cash or check.

Bank fees incurred on any check returned for insufficient funds will be charged to the parent. A fee of \$25.00 will be charged to the parents for each check returned for insufficient funds. **The fee may not exceed \$25.00, RSA 358-C:5, I.)** In accordance with RSA 358-C:5, notice of the fee charged for a check that is returned for insufficient funds shall be included in any letter sent to a Parent seeking payment because the student meal account has a negative balance.

Each notice to parents will include information on how to verify a student meal account balance, resolve concerns regarding the accuracy of the account balance, or obtain information on the school meal program, including the name, title, hours when available, phone number, and e-mail address of an appropriate member of the District staff.

#### Parental Restrictions on Use of Student Meal Account

Parents who establish a meal account for their student are responsible for communicating with their student any restrictions the parent chooses to place on use of the account. Unless restricted by the parent, a student may purchase à la carte items in addition to the regular meal choices. Some students purchase more than one meal at one sitting. Parents must monitor the student's use of the meal account to ensure that a sufficient balance is available at all times for their student to charge meals.

**Balance Statements**

The District will work proactively with parents to maintain a positive balance in their student's meal account. A low balance statement will be sent to parents whenever the student's meal account falls to or below \$10.00.

The notices will be sent weekly by e-mail and a sealed letter will be sent home with the student. Only those District staff who have received training on the confidentiality requirements of federal and state law, including the United States Department of Agriculture's ("USDA") guidance for school meal programs, and who have a need to access a child's account balance and eligibility information may communicate with parents regarding unpaid meal charges. Volunteers, including parent volunteers, will not be used to communicate with parents regarding unpaid meal charges. 42 U.S.C. 1758(b)(6).

**Students Without Cash in Hand or A Positive Account Balance***Elementary Schools*

Regardless of whether a student has money to pay for a meal or has a negative balance in the student account, a student requesting a meal shall be provided with one from among the choices available to all students. No meal will be thrown away because of the balance of the student's account.

For any meal purchase where the account would result in a negative balance of \$10.00 or more, the student will continue to receive a "reimbursable" meal based on daily offerings. A reimbursable meal is defined as a meal consisting of meat/meat alternative, grains, fruits, vegetables, and a milk further defined by the National School Lunch Program requirements. Staff must take reasonable steps to minimize statements or actions that may overly identify children eligible for free meals. This "reimbursable" meal will be charged to the child's meal account at the standard lunch rate.

*Middle and High Schools*

If a student does not have enough money to purchase a meal, the student will be allowed to receive the meal of his/her choice until such time as the student attempts to make a purchase that would result in a negative balance of \$10.00 or more.

For any meal purchase where the account would result in a negative balance of \$10.00 or more, the student will receive a breakfast at the standard breakfast rate and will be provided a lunch based on daily offerings such as a sandwich of sunflower butter & jelly on whole wheat bread and a cup for water. The School District recognizes that the lunch replacement meal cost is non-reimbursable to the School District.

A la carte and snack purchases are not permitted for any student that has a negative balance. The student's account balance must have sufficient funds for these types of purchases.

This policy shall apply equally to all students regardless of free/reduce/or full pay status.

If a student with a negative balance their account seeks to purchase a meal with cash or check, the student will be allowed to do so. There is no requirement that the funds be applied first to the debt.

*Adults*

No purchases will be allowed without proper payment.

**Unresolved Debt**

If the student's meal account balance debt grows to \$20.00 or more a letter requesting immediate payment shall be sent by US Mail to the parent/guardian or the parent/guardian shall be contacted by the Principal or designee by phone or in person. Where warranted, the Principal or designee may arrange a payment schedule to address current student account arrearages while the school continues to provide the student with meals. At the discretion of the Principal or designee, an application for free or reduced cost meals should be explored with the parent/guardian if warranted.

If the student's meal account debt grows to \$50.00 or more, the parent/guardian will be requested to meet with the Principal or designee.

If parents continue to fail to provide the student with a meal sent from home, continue to fail to provide funds for their student to use the school lunch program, refuse to cooperate with reasonable requests by District staff to address the overdue debt, and the parent is believed to have the ability to pay, the Superintendent may pursue payment through civil legal action, including filing a claim in small claims court pursuant to RSA Chapter 503.

Applying the policy set forth above, the Superintendent shall determine if further collection efforts are in the best interest of the District. Any payments collected on debt that has been offset with District funds, shall be credited to the District. All debt collection efforts shall comply with RSA Chapter 358-C, New Hampshire's Unfair, Deceptive or Unreasonable Collection Practices Act.

Annually, the Director of Food Services will report:

1. The cost, if any, for an alternative meal at the elementary and middle school level.
2. By school level, the amount of unpaid meal charges, the number of students involved, and the number of unpaid balances that have been sent to collection.

**Assessment for Neglect Reporting**

If a student who has been determined to be ineligible for free or reduced cost meals or whose parents have refused to cooperate with filing an application for free or reduced cost meals and is consistently not provided with meals, either through a meal sent from home or funds to purchase a meal through the school meal program, the Principal will assess whether a report of child neglect is warranted to the New Hampshire Department of Health and Human Services, Division for Children, Youth, & Families, as required by RSA 169-C:29-31.

**Staff Enforcement of Policy/Training**

A copy of this policy and refresher training shall be provided annually to all food service and school staff responsible for serving student meals or enforcing this policy. New staff with these responsibilities shall be provided with a written copy and training on the policy during their initial training or orientation. In accordance with federal requirements, a record shall be maintained documenting that all applicable staff, including new hires, receive a copy of the policy and refresher training annually.

**Student with Special Dietary Needs**

Nothing in this policy prohibits providing an appropriate meal to a student with special dietary needs. If the meal is medically required, and the student has a negative student meal account balance, or does not have cash to purchase the meal, the necessary dietary needs will be met.

To request meal accommodations for students whose dietary needs qualify them for accommodation under law or to file a school meal program complaint with the District, contact the Director of Food Service at phone number 603-966-1300.

To file a program complaint of discrimination with the USDA, 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:

1. MAIL TO:
  - a. U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410;
2. FAX TO:
  - a. (202) 690-7442; or
3. EMAIL TO:
  - a. [program.intake@usda.gov](mailto:program.intake@usda.gov).

This District is an equal opportunity provider.

#### **Nondiscrimination**

It is the District's policy that in the operation of child feeding programs, no child will be discriminated against because of race, sex, color, national origin, age, or disability. 7 C.F.R. 245.5(a)(1)(viii). Students will not be denied meals due to the existence of other unpaid charges at the school or for disciplinary reasons.

#### **Legal References:**

*RSA 189:11-a Food and Nutrition Programs*

*RSA 358-C:5, Check Collection Charges*

*2 C.F.R. §200.426, Bad Debts*

*7 C.F.R §210.09, Agreement with State agency*

*7 C.F.R §210.10, Meal requirements for lunches and requirements for afterschool snacks*

*7 C.F.R §210.15, Reporting and recordkeeping*

*7 CFR 245.5, Public announcement of the eligibility criteria*

*7 CFR Part 15, Subpart A, Nondiscrimination*

*15 U.S.C. § 1692-169, Federal Fair Debt Collection Practices Act (FDCPA)*

*42 U.S.C. 1758(b)(6), Use or disclosure of information*

*USDA SP 02-2015, Online Fees in the School Meal Programs*

*USDA SP 37-2016, Meaningful Access for Persons with Limited English Proficiency (LEP) in the School Meal Programs*

*USDA SP 46-2016, No later than July 1, 2017, all SFA's operating the Federal school meal program are required to have a written meal charge policy.*

***Legal References Disclaimer:*** *These references are not intended to be considered part of this policy, nor should they be taken as a comprehensive statement of the legal basis for the Board to enact this policy, nor as a complete recitation of related legal authority. Instead, they are provided as additional resources for those interested in the subject matter of the policy.*



## App prototype cover page

**Numero OMB: 0584-0026**  
**Expiration date: 31/07/2023**

This information is being collected to assist the Food and Nutrition Service (FNS) in providing program operators with a prototype application for participation in the National School Lunch Program (NSLP) and the School Lunch Program (SLP). This application prototype meets all regulatory requirements. Although it is voluntary for program operators to use this prototype application, the information it collects is necessary for applicants to obtain program benefits under the Richard B. Russell National School Lunch Act (NSLA) (42 U.S.C. § 1758). FNS does not use the information collected at the local level. This collection requests personally identifiable information under the Privacy Act 1974; All responses must be kept private to the extent provided by law. Under the Paperwork Reduction Act of 1995, an agency cannot conduct or sponsor, and a person is not required to respond, a collection of information unless it displays a valid OMB control number. The OMB control number for this information collection is 0584-0026. The time required to complete this information collection is estimated to average 7 minutes per response, including the time to review instructions, research existing data sources, collect and maintain the necessary data, and complete and review the information collection. Please send comments on this load estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Department of Agriculture, U.S. Food and Nutrition Service, Child Nutrition, Office of Policy Support, 1320 Braddock Place, 5th floor, Alexandria, VA 22314, ATTN: PRA (0584-0026). Do not return the completed form to this address.



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STEP 1

List ALL children, infants, and students up to and including grade 12. Attach another sheet of paper if you need space for more names.

List ALL children in the household. Do not forget to list infants, children attending other schools, children not in school, and children not applying for benefits. This includes children not related to you in your household.

Child's First Name	MI	Child's Last Name	Grade	Foster Child	Migrant	Runaway	Homeless	If you checked any of these boxes, please refer to the Application Instruction's Step 1: Part C & Part D.

Check all that apply

STEP 2

Do any household members (including you) participate in: SNAP or TANF? Please note: Medicaid does NOT qualify households for meal benefits in NH.

NO → Go to STEP 3.

YES → Write case number here and proceed to STEP 4.

CASE NUMBER (NOT EBT NUMBER):

SELECT ONE: SNAP TANF

\*\*\*Household must submit backup documentation if providing a case number. I.e. Notice of Decision (NOD) from NH DHHS\*\*\*

STEP 3

List ALL household members and income for each member (before taxes and deductions)

A. All Adult Household Members (Anyone who is living with you and shares income and expenses, even if not related, including you.)

List all Adult Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they receive income, report total gross income (before taxes and deductions) for each source in whole dollars (no cents) only. 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.

Name of Adult Household Members (First and Last)	Earnings from Work			How often received?			Public Assistance, Child Support, Alimony	How often received?			Pensions, Retirement, Social Security, SSI, VA Benefits, All Other	How often received?			
	Weekly	Every 2 Weeks	Monthly	Annual	Weekly	Every 2 Weeks		Monthly	Weekly	Every 2 Weeks		Monthly			
	\$						\$								
	\$						\$								
	\$						\$								
	\$						\$								
	\$						\$								

Total Household Members (Children and Adults)

Last Four Numbers of Social Security Number of Primary Wage Earner or other Adult Household Member (If Applicable)

Child Income

How often received?

Weekly

Every 2 Weeks

Monthly

Annual

Check if no Social Security Number

B. Child Income

Sometimes children in the household earn or receive income.

Include the TOTAL income (before taxes and deductions) received by ALL children listed in STEP 1 here.

Please see application's back for list of income sources.

STEP 4

Contact information and adult signature. RETURN COMPLETED FORM TO YOUR CHILD'S SCHOOL: Insert school address here

"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 (confirm) 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."

Print Name of Adult Signing the Form

Signature of Adult

Today's Date

Mailing Address (if available)

City

State

Zip

Phone (optional)

Email (optional)

SOURCES AND EXAMPLES OF INCOME

For additional information on income, please refer to the instructions that accompany this application.

Sources of Income			Examples of Income for Children
Earnings from Work	Public Assistance/Alimony/Child Support	Pensions/Retirement/All other sources of income	
<ul style="list-style-type: none"><li>Salary, wages, cash bonuses, tips, commissions</li><li>Net income from self-employment (farm or business)</li></ul> <p><b>If you are in the U.S. Military:</b></p> <ul style="list-style-type: none"><li>Basic pay and cash bonuses (do NOT include combat pay, FSSA, or privatized housing allowances)</li><li>Allowances for off-base housing, food, and clothing</li></ul>	<ul style="list-style-type: none"><li>Unemployment benefits</li><li>Workers' 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>Veterans' benefits</li><li>Strike benefits</li></ul>	<ul style="list-style-type: none"><li>Social Security/Disability (including railroad retirement and black lung benefits)</li><li>Private Pensions or disability benefits</li><li>Income from trusts or estates</li><li>Annuities</li><li>Investment income</li><li>Earned interest</li><li>Rental income</li><li>Regular cash payments from outside household</li></ul>	<ul style="list-style-type: none"><li>A child has a regular full or part-time job where they earn a salary or wages</li><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><li>A friend or extended family member regularly gives a child spending money</li><li>A child receives regular income from a private pension fund, annuity, or trust</li></ul>

OPTIONAL

Children's ethnic and racial identities. This information is kept confidential and may be protected by the Privacy Act of 1974.

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 (check one): ☐ Hispanic or Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish Culture or origin, regardless of race) ☐ Not Hispanic or Latino

Race (check one or more): ☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White

Return this completed form to your child's school. \*Do not mail, fax, or email completed applications to the U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights.

DO NOT FILL OUT

For school use only.

Annual Income Conversion: Weekly × 52, Every 2 Weeks × 26, Twice a Month × 24, Monthly × 12. Do not annualize income to determine eligibility unless more than one income frequency is listed.

Total Income	<div>Weekly</div> <div>Every 2 Weeks</div> <div>2x/Month</div> <div>Monthly</div> <div>Annual</div>	Household size	Categorical Eligibility	<div>Free</div> <div>Reduced</div> <div>Denied</div>	Verifying Official's Signature	Date

Use of Information Statement	The contact information below is solely to file a complaint of discrimination
<p>The Richard B. Russell National School Lunch Act requires that we use information from this application to see who qualifies for free or reduced-price meals. We can only approve complete forms. We may share your eligibility information with education, health, and nutrition programs to help them deliver program benefits to your household. Inspectors and law enforcement may also use your information to make sure that program rules are met.</p> <p>Please be sure to provide the last four numbers of the Social Security number of the adult household member who signs the application. If the adult does not have one, 'Check if no Social Security Number.' Applications for a foster child do not need to list a Social Security number. Applications for children in households receiving Supplemental Nutrition Assistance Program (SNAP) or Temporary Assistance for Needy Families (TANF) or Food Distribution Program on Indian Reservations (FDPIR) do not need to list a Social Security number.</p> <p>Some children qualify for free meals without an application. Please contact your school to get free meals for a foster child, and children who are homeless, migrant, or runaway.</p>	<p>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, religion, sex, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.</p> <p>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 State or local Agency that administers the program or contact USDA through the Telecommunications Relay Service at 711 (voice and TTY). Additionally, program information may be made available in languages other than English.</p> <p>To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at <a href="#">How to File a Program Discrimination Complaint</a> and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Mail Stop 9410, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: <a href="mailto:program.intake@usda.gov">program.intake@usda.gov</a>.</p> <p>USDA is an equal opportunity provider, employer, and lender.</p>

Return completed form to your child's school.