



# Wahoo Public Schools

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Dear Parent/Guardian,

August 18, 2011

Welcome back to a new school year.

Enclosed you will find a free/reduced lunch application, the instructions for filling out that application, information about activity tickets, and a student fee waiver form for students who qualify for free/reduced lunches. A student waiver qualifies your child for an activity ticket. Only students who participate in activities in grades 6-12 qualify. **Students who owe fines from last school year will need to pay their fines before an activity ticket will be issued.**

When filling out the application for free/reduced lunch, please read the instructions and fill it out correctly. The application cannot be processed if it is incomplete. Please return the completed application by **September 2, 2011**.

The lunch prices this year have changed slightly. The prices are as follows:

Elementary-	Breakfast -	.85	Lunch -	\$1.80
Middle School -	Breakfast -	\$1.05	Lunch -	\$2.05
High School -	Breakfast -	\$1.05	Lunch -	\$2.05
Reduced-	Breakfast-	.30	Lunch-	.40

Please make sure your student has lunch money in their account as we will not allow them to eat lunch if they have a **negative** lunch balance. We will remind your child to bring lunch money when they reach \$5.00 in their lunch account. If your child's lunch account reaches zero or below, we will ask them to eat **one** peanut butter & jelly sandwich and a carton of milk at the cost of **.50**. If your child is on free/reduced lunch they **will not** be able to purchase any **extra** food or drink if they do not have money in their account. Please be sure to have money in their account if they wish to purchase any extras.

The prices of our lunch are as follows:

Main entrée -	\$2.05
Salad bar <b>as</b> main entrée -	\$2.05 (this includes soup)
Extra entrée -	.75
Extra slice of Pizza Hut pizza -	\$1.00
Bottle of water or juice -	\$1.00
Soup (if did not get salad bar as main entrée) -	.75
Yogurt - (this is not included in the salad bar) -	.50
Any item off the salad bar (if did not get salad bar as a main entrée) -	.50
Milk -	.40

Sincerely ,  
Kathy Myers, Lunch Coordinator

*"Developing Capable and Responsible Life-long Learners"*



**Your children may qualify for free or reduced price meals if your household income falls at or below the limits on this chart.**

<b>FEDERAL INCOME CHART</b>					
for School Year 2011-12					
Household size	Yearly	Monthly	Twice per Month	Every Two Weeks	Weekly
1	20,147	1,679	840	775	388
2	27,214	2,268	1,134	1,047	524
3	34,281	2,857	1,429	1,319	660
4	41,348	3,446	1,723	1,591	796
5	48,415	4,035	2,018	1,863	932
6	55,482	4,624	2,312	2,134	1,067
7	62,549	5,213	2,607	2,406	1,203
8	69,616	5,802	2,901	2,678	1,339
Each additional person:	7,067	589	295	272	136

**Privacy Act Statement: This explains how we will use the information you give us.**

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 are 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.

**Non-Discrimination Statement:** This explains what to do if you believe you have been treated unfairly.

“In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer.”

## Computing Income for Self-Employed Individuals

Individuals who are self-employed or engaged in farming may experience variations in cash flow and cannot easily report a monthly income. These individuals may use their 2010 U.S. Individual Income Tax Return Form 1040 to report self-employment income for the free and reduced price meal application. The income to be recorded is income derived from the business venture less operating costs incurred in the generation of that income. Deductions for personal expenses, such as interest on home mortgages, medical expenses, and other similar non-business items are not allowed in reducing gross business income.

USDA has announced that **losses** (negative numbers) on the lines listed below can be used to determine the **total** income for this attachment. If the total income is a negative number, it must then be recorded as zero on the application in the category labeled "All Other Income".

Zero income resulting from the use of Form 1040 does not require follow-up.

Please note: Line **7** cannot be reported as current income. Income from wages or salaries must be reported on the application for the most recent month.

Line **22** (total income) and line **37** (adjusted gross income) may not be used for purposes of applying for free and reduced-price meals.

The required information for determining the allowable income from self-employment is to be taken from the **2010 U.S. Individual Income Tax Return Form 1040**.

Line 12, Business Income (or loss)	
Line 13, Capital Gain (or loss)	
Line 14, Other Gains (or losses)	
Line 17, Rental Real Estate, etc.	
Line 18, Farm Income (or loss)	

**NOTE:** If any members of the household have income from wages or salary, the gross income from last month must be reported on the application form.

This attachment is used only to report income from self-employment and/or farming.

Total of above lines: \_\_\_\_\_ **equals annual self-employed income\***

**If the total of the above lines is a negative number, it must be changed to zero before it is transferred to the application.**

\* This figure is to be reported on the application under "All Other Income".

## Instructions for Completing the Free & Reduced Priced School Meals Family Application

**If your household receives benefits from the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance to Needy Families (TANF) or the Food Distribution Program on Indian Reservations (FDPIR), follow these instructions:**

- Part 1:** List each child's name, the school they attend and their grade.  
**Part 2:** Enter household's Master Case Number if the household qualifies for SNAP, TANF or FDPIR.  
**Part 3:** Skip this part.  
**Part 4:** Sign the form. The last four digits of a Social Security Number do not need to be reported.  
**Part 5:** Answer this question if you choose to.

**If you are applying for a FOSTER CHILD, follow these instructions:**

**If all children in the household are foster children:**

- Part 1:** List all foster children, the school they attend and their grade. Check the box indicating the child is a foster child.  
**Part 2:** Skip this part.  
**Part 3:** Skip this part.  
**Part 4:** Sign the form. The last four digits of a Social Security Number do not need to be reported.  
**Part 5:** Answer this question if you choose to.

**If some of the children in the household are foster children:**

- Part 1:** List all children, including foster children, the school they attend and their grade. Check the box if the child is a foster child.  
**Part 2:** If the household does not have a Master Case Number, skip this part.  
**Part 3:** Follow these instructions to report total household income from last month.  
**Column 1 – Household Names:** List the first and last name of **each** person living in your household, related or not (such as grandparents, other relatives or friends) who share income and expenses. Attach another sheet of paper if necessary.  
**Column 2 - Gross Income and How Often it was Received:** For each household member, list each type of income received for the month. You must also report how often the money is received – weekly, every other week, twice a month, or monthly. For earnings, be sure to list the **gross income**, not the take-home pay. **Gross income is the amount earned before taxes and other deductions.** You should be able to find it on your pay stub or your boss can tell you. For other income, list the amount each person received for the month from welfare, child support, alimony, pensions, retirement, Social Security, Supplemental Security Income (SSI), Veteran's benefits (VA benefits) and disability benefits. Under *All Other Income*, list Worker's Compensation, unemployment or strike benefits, regular contributions from people who do not live in your household and any other income. For individuals who are self-employed, report income after expenses from business, farm or rental property. **Do not include income** from SNAP, FDPIR, WIC, Federal education benefits and foster payments received by the family from the placing agency. If you are in the Military Privatization Housing Initiative or receive combat pay, do not include these allowances as income.  
**Column 3–Check if NO income:** If the person does not have any income, check this box.  
**Part 4:** An adult household member must sign the form and list the last four digits of their Social Security Number OR mark the box if he/she doesn't have one.  
**Part 5:** Answer this question if you choose to.

**For ALL OTHER HOUSEHOLDS, including WIC households, follow these instructions:**

- Part 1:** List all children, including foster children, the school they attend and their grade. Check the box if the child is a foster child.
- Part 2:** If the household does not have a Master Case Number, skip this part.
- Part 3:** Follow these instructions to report total household income from last month.
- Column 1 – Household Names:** List the first and last name of **each** person living in your household, related or not (such as grandparents, other relatives or friends) who share income and expenses. Attach another sheet of paper if necessary.
- Column 2 - Gross Income and How Often it was Received:** For each household member, list each type of income received for the month. You must also report how often the money is received – weekly, every other week, twice a month, or monthly. For earnings, be sure to list the **gross income**, not the take-home pay. **Gross income is the amount earned before taxes and other deductions.** You should be able to find it on your pay stub or your boss can tell you. For other income, list the amount each person received for the month from welfare, child support, alimony, pensions, retirement, Social Security, Supplemental Security Income (SSI), Veteran’s benefits (VA benefits) and disability benefits. Under *All Other Income*, list Worker’s Compensation, unemployment or strike benefits, regular contributions from people who do not live in your household and any other income. For individuals who are self-employed, report income after expenses from business, farm or rental property. **Do not include income** from SNAP, FDPIR, WIC, Federal education benefits and foster payments received by the family from the placing agency. If you are in the Military Privatization Housing Initiative or receive combat pay, do not include these allowances as income.
- Column 3–Check if NO income:** If the person does not have any income, check this box.
- Part 4:** An adult household member must sign the form and list the last four digits of their Social Security Number OR mark the box if he/she doesn’t have one.
- Part 5:** Answer this question if you choose to.