



LUNCH APPLICATION

ADVISORY CONTEST



The Advisory Class that turns in the highest percentage by August 31st or the first to turn in 100% will win a PIZZA PARTY (separate parties will be awarded for high school and middle school)

RULES:

COMPLETED APPLICATIONS MUST BE TURNED INTO YOUR ADVISORY TEACHER ON FRIDAY, AUGUST 31st.

1. ATTACHED IS A LUNCH APPLICATION FOR THE 2018-2019 SCHOOL YEAR. A FORM MUST BE COMPLETED FOR EACH STUDENT EACH SCHOOL YEAR.
2. PLEASE COMPLETE ALL FOUR (4) SECTIONS OF THE APPLICATION. BE SURE TO SIGN AND DATE AT THE BOTTOM!!
3. IF YOUR CHILD QUALIFIES UNDER SNAP, TANF OR FDPIR, PLEASE FILL OUT AS BELOW:

2018-2019 Prototype Household Application for Free and Reduced Price School Meals
 Complete one application per household. Please use a pen (not a pencil).

STEP 1 List ALL Household Members who are infants, children, and students up to and including grade 12 (if more spaces are required for additional names, attach another sheet of paper)

Child's First Name	MI	Child's Last Name	Grade	Student?	Infant, Child, or Student?
JIMMY		FALLOON		<input type="checkbox"/>	<input type="checkbox"/>

STEP 2 Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF, or FDPIR?
 IF NO -> Go to STEP 3. IF YES -> Write a case number here then go to STEP 4 (Do not complete STEP 3). Case Number: **12345678**

STEP 3 Report Income for ALL Household Members (Skip this step if you answered "Yes" to STEP 2)

A. Child Income
 Sometimes children in the household earn or receive income. Please include the TOTAL income received by all Household Members listed in STEP 1 here.

B. All 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 gross income (before taxes) for each source in which dollars (no cents only). If they do not receive income from any source, write "0". If you enter "0" or leave any field blank, you are certifying (swearing) that there is no income to report. Fill the page and review for clarity. Read "Sources of Income" for more information.

Name of Adult Household Member (First and Last)	Earnings from Work	Retiree	Dividend or Stock	Public Assistance (Other Government)	Spouse's Income	Unemployment	Other Income
	\$	\$	\$	\$	\$	\$	\$

STEP 4 Contact information and adult signature. **Red Completed Form To: MEDIA ARTS COLLABORATIVE CHARTER SCHOOL, 461 CENTRAL AVE. NE, BLDG #2 ALBUQUERQUE, NM 87119**

123 4th St. Mr. Fallon
 Arga NM 87107
 Mr. Fallon
 8/24/18

4. IF YOU FEEL THAT YOUR INCOME WILL EXCEED THE AMOUNT TO QUALIFY FOR FREE OR REDUCED LUNCH AND WISH NOT TO DISCLOSE

YOUR INCOME, PLEASE FILL OUT THE FORM AS BELOW AND YOUR CHILD(REN) WILL HAVE FULL PAY STATUS:

2018-2019 Prototype Household Application for Free and Reduced Price School Meals
 Complete one application per household. Please use a pen (not a pencil).

STEP 1 List ALL Household Members who are infants, children, and students up to and including grade 12 (if more spaces are required for additional names, attach another sheet of paper)

Child's First Name	MI	Child's Last Name	Grade	Student?	Other Child?	Income Source?
SELENA		GOMEZ		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Case Number: _____

STEP 3 Report income for ALL household members (go to this step if you answered "Yes" to STEP 2)

A. Child Income
 Sometimes children in the household earn or receive income. Please include the TOTAL income received by all household members listed in STEP 1 here.

B. All 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 gross income (before taxes) for each source in whole dollars (no cents) only. If they do not receive income from any source, write "0". If you enter "0" for any source, you are certifying (promising) that there is no income to report from that source.

Do Not Qualify

STEP 4 Contact information and adult signature: **MACCS ARTS COLLABORATIVE CHARTER SCHOOL, 4621 CENTRAL AVE. NE, BLDG #1, ALBUQUERQUE, NM 87110**

Address: 678 9th St. City: ABQ State: NM Zip: 87107
 Signature: Mrs. Gomez Date: _____

- IF YOU HAVE MULTIPLE STUDENTS AT MACCS, PLEASE MAKE A COPY OF YOUR FORM AT THE FRONT DESK SO THAT EACH STUDENT CAN TURN IT INTO THEIR OWN ADVISORY TEACHER
- IF YOU HAVE ANY QUESTIONS ON HOW TO COMPLETE THIS FORM, PLEASE CONTACT MR. KELLY AT pkelly@nmmediaarts.org or 505-243-1957 ext. 200

PLEASE NOTE:

IN ORDER FOR MACCS TO BILL ACCURATELY, WE NEED ALL FORMS COMPLETED AS SOON AS POSSIBLE. ALL FORMS RETURNED BY AUGUST 31ST WILL BE RETROACTIVE TO THE BEGINNING OF SCHOOL FOR ALL BREAKFASTS AND LUNCHEAS EATEN BY THE STUDENT. **IF A FORM IS NOT TURNED IN BY FRIDAY, AUGUST 31ST, YOUR STUDENT MAY BE BILLED AT FULL PAY UNTIL THE FORM IS TURNED IN.**

COMPLETION OF THIS FORM HELPS OUR SCHOOL OBTAIN ACCURATE DEMOGRAPHIC DATA THAT MAY HELP US WITH GRANTS AND OTHER FUNDING SOURCES. PLEASE HELP US BY REACHING OUR GOAL OF HAVING A FORM FOR EACH STUDENT AT MACCS!!