

COMMUNITY ELIGIBILITY PROVISION (CEP) AND FEE WAIVER ELIGIBILITY

FOR 2016-2017

FOR AUDUBON, FULTON, LINCOLN, MARSHALL AND PRESCOTT ELEMENTARY SCHOOLS
AND JEFFERSON MIDDLE SCHOOL

NO-COST BREAKFAST AND LUNCH AT YOUR SCHOOL

Again this year, six schools in the Dubuque Community School District (Audubon, Fulton, Lincoln, Marshall, Prescott and Jefferson) will participate in the Community Eligibility Provision, a provision of the federal lunch program that provides no-cost reimbursable meals to all students at participating schools. This offering provides federal funding for the district to expand access to healthy school lunches and ensure that students receive nutritious meals.

THIS PACKET INCLUDES:

- » **FREQUENTLY ASKED QUESTIONS**
See reverse side for the most common CEP questions and info you need to know.
- » **HOUSEHOLD INCOME FORM**
The paperwork that must be completed to participate in the program. Please complete only one (1) form per household.
- » **INSTRUCTIONS**
See reverse side of the Household Income Form for details on how to complete the form, including an Income Guideline Chart to help you determine what option to select.
- » **THE FEE WAIVER BENEFITS FORM**
The required form to request having other district fees waived.

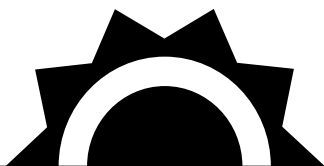
» OTHER IMPORTANT NOTES

- » **A new form must be completed each and every school year.**
- » **The Household Income Form must be completed in full for eligible families to receive student fee waiver benefits.**
To apply for these benefits, you must also complete the Fee Waiver Benefits Form.

RETURN COMPLETED AND SIGNED FORMS BY:

- » Mail to the Dubuque Community School District Food and Nutrition Services Department using the return envelope enclosed in the summer registration mailing
- » OR deliver to any Dubuque Community School

NOTE: If you have a student attending a school not in the Community Eligibility Provision, they can still be considered for free and reduced-price meals by completing the Free and Reduced-Price Meals Application. This application, and the Fee Waiver Benefits Form, are available at any school, online at www.dbqschools.org/forms, or by calling 563/552-3237.



The most important meals of the day..

Did you know that the Dubuque Community School District serves both **BREAKFAST** and **LUNCH**?
Take advantage of both healthy school meals!

FOR ADDITIONAL INFORMATION CONTACT the food and nutrition services department at 563/552-3237.
For fee waiver questions, contact the Board of Education Secretary at 563/552-3037.

The Dubuque Community School District will not tolerate bullying/harassment based upon a trait or characteristic of a student or staff member including, but not limited to, age, color, creed, national origin, race, religion, marital status, sex, sexual orientation, gender identity, physical attributes, physical or mental ability or disability, ancestry, political party preference, political belief, socioeconomic status or familial status. This institution is an Equal Opportunity Provider and Employer.

FREQUENTLY ASKED QUESTIONS

What is the Community Eligibility Provision (CEP)? Community Eligibility Provision (CEP) was created as part of the USDA's National School Lunch Program. It allows schools with high eligibility for free and reduced-price meals to provide a no-cost reimbursable lunch and breakfast for all students in the school regardless of income.

Will my child receive free or reduced-price meals even if we aren't income eligible? All students in the CEP school will receive a no-cost reimbursable lunch and breakfast meal regardless of income. The meal must meet the federal guideline for reimbursable meals. This does not include milk only sales or extra a la carte sales.

Why did my child's school send home CEP Household Income and Fee Waiver Benefits Forms? The CEP program allows schools to provide no-cost reimbursable meals to all students regardless of income; therefore, free and reduced-price meals applications are no longer needed to determine eligibility. However, the Department of Education has historically used the number of eligible students to determine the amount of state aid for school districts, among other things. A school with more eligible students generally will receive more state aid. The form also includes a section for waiving or reducing certain allowable fees within the district. The CEP Household Income Form and, if applicable, Fee Waiver Benefits Form are important for all CEP families to complete and return to school.

I have more than one child - do I need to fill out more than one form? One (1) form is needed if all your children attend a CEP school. See the following question if you have children attending both CEP and non-CEP schools.

Will all of my children receive free meals (even in different schools)? Only the CEP schools will provide a no-cost reimbursable breakfast and lunch to all students. If you have a child in a school that is not participating in the CEP program, that child will only receive free or reduced-price meals if you are eligible per the requirements of the National School Lunch Program. A free and reduced-price meals application is required to determine eligibility. The free and reduced-price meals application will be mailed with registration packets and available at school offices and the Food and Nutrition Services office.

What happens if I refuse to fill out the CEP Household Income Form? If households fail to complete the CEP Household Income Form, the delivery of programs and services in your child's school may be impacted; therefore, it is very important that every household accurately completes the form.

Will the district share my information? The information collected on the CEP Household Income and Fee Waiver Benefits Forms will be protected using the same protocol as the information collected through the National School Lunch Program's free and reduced-price meals application.

What if my child changes schools? Your child is eligible for no-cost meals at the school where he/she is currently enrolled. If he/she eats meals at or transfers to a non-CEP school during the 2016-2017 school year, you may be responsible for meal charges.

What will happen to my child's meal account? Meal accounts that have money may be transferred to a sibling's account or money may be refunded. Money can also stay on the account for additional a la carte items served at schools. All meal accounts with a negative balance will remain on the account until fully paid. Contact the Food and Nutrition Services office at 563/552-3225 or e-mail food@dbqschools.org to inquire about your student's account.

Who should I contact with questions about the CEP Household Income and Fee Waiver Benefits Forms or the CEP program? All questions should first be directed to your child's school office. They can direct you to the appropriate point of contact within the district.

This institution is an equal opportunity provider of USDA Child Nutrition Programs.



COMMUNITY ELIGIBILITY PROVISION (CEP)
HOUSEHOLD INCOME FORM

FOR 2016-2017

FOR AUDUBON, FULTON, LINCOLN, MARSHALL AND PRESCOTT ELEMENTARY SCHOOLS
AND JEFFERSON MIDDLE SCHOOL

This Household Economic Assessment is needed from each household at schools participating in the Community Eligibility Provision, a federal program that provides no-cost meals to all students in those schools. NOTE: This form must be completed for eligible families to receive student fee waiver benefits. To apply for these benefits, you must also complete the attached Fee Waiver Benefits form.

PART 1 (CHECK ONE BOX)

- [] A MEMBER OF MY HOUSEHOLD RECEIVES FEDERAL BENEFITS, A DHS LETTER, IS HOMELESS OR IS A FOSTER CHILD.
[] OUR HOUSEHOLD INCOME EXCEEDS THE INCOME GUIDELINE CHART ON THE BACK OF THIS FORM.
[] NEITHER OF THE ABOVE OPTIONS DESCRIBE MY HOUSEHOLD.

PART 2: HOUSEHOLD SIZE

TOTAL NUMBER OF PEOPLE IN YOUR HOUSEHOLD: (include all children and adults)

PART 3: STUDENT INFORMATION List all students in your household attending a school listed below. Attach a separate page if more space is needed.

Table with 3 columns: NAME (last, first, middle initial), GRADE, SCHOOL ATTENDING (check one). Rows for Audubon, Fulton, Lincoln, Marshall, Prescott, Jefferson.

PART 4: TOTAL HOUSEHOLD GROSS INCOME Gross income is the amount earned before taxes and other deductions, not take-home pay.

Table for household income reporting. Columns include: NAME OF HOUSEHOLD MEMBERS, Check if NO income, GROSS INCOME (weekly, 2 weeks, twice a month, monthly), OTHER MONTHLY INCOME (Welfare, Pension, etc.).

PART 5: CONTACT INFORMATION AND SIGNATURE

PARENT / GUARDIAN NAME: PHONE:
ADDRESS: CITY: ZIP:

By signing below, I certify that I am the parent/guardian of the child(ren) listed above. I certify that all information on this form is true and that all income is reported if required.

PARENT / GUARDIAN SIGNATURE DATE

NOTE: If you have a student attending a school not in the Community Eligibility Provision, they can still be considered for free and reduced-price meals by completing the Free and Reduced-Price Meals Application. This application, and the Fee Waiver Benefits Form, are available at any school, online at www.dbqschools.org/forms, or by calling 563/552-3237.

ADMINISTRATIVE USE ONLY

PROCESSED BY AUTHORITY:

HOUSEHOLD INCOME: [] Annual Income \$ [] Federal Benefits ELIGIBLE: [] Yes [] No STATUS: [] Free [] Reduced [] Full Pay

Instructions for Completing Community Eligibility Provision (CEP) Household Income Form

The information submitted on this form is a confidential educational record and is therefore protected by all relevant federal and state privacy laws that pertain to educational records including, without limitation, the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended (20 U.S.C. § 1232g; 34 CFR Part 99); Title 2, Division 4, Part 27.

Who should I include in “household size”? (PART 2 ON REVERSE SIDE)

- You must include yourself and all people living in your household, related or not.

What is included in “total gross household income”? (PART 4 ON REVERSE SIDE)

- Gross earnings from work. Use your gross income, not your take-home pay. Gross income is the amount earned before taxes and other deductions. Include overtime pay only if received regularly.
- Welfare, Child Support, Alimony. Include the amount each person living in your household receives from these sources.
- Pension, Retirement, Social Security, SSI, VA Benefits and Disability Benefits. Include the amount each person living in your household receives from these sources.
- All Other Income. Include workers’ compensation, unemployment income, strike benefits and any other income received on a regular basis.
- Child Income. Include earnings from work, Social Security disability payments, income from persons outside the household and income from any other sources (private pension fund, annuity, or trust).

How do I report total gross household income when I receive a paycheck once a month, twice a month, every 2 weeks, or once a week? (PART 4 ON REVERSE SIDE)

- Determine each source of household income based on the above definitions. Record all income in appropriate boxes for each individual receiving income. If a household member has more than one income source, record each in the appropriate box. Combine amounts if needed. For example, if you receive two biweekly paychecks, add the two gross amounts together for a total biweekly income.

Example: John Doe works two part time jobs. He is paid weekly from one job and monthly from the other. He also receives Child Support. He would record his income as shown below.

NAME (last, first, middle initial)	Check if NO income	GROSS INCOME (report all that apply)				OTHER MONTHLY INCOME		
		Gross amount earned weekly	Gross amount earned every 2 weeks	Gross amount earned twice a month	Gross amount earned monthly	Welfare, Child Support, Alimony, Adoption Subsidies	Pension, Retirement, Social Security, SSI, VA Benefits	All other income
Doe, John A	[]	\$100.00			\$350.00	\$250.00		

Federal Income Eligibility Guidelines for School Year 2016-2017

HOUSEHOLD SIZE	YEARLY	MONTHLY	TWICE PER MONTH	EVERY TWO WEEKS	WEEKLY
1	21,978	1,832	916	846	423
2	29,637	2,470	1,235	1,140	570
3	37,296	3,108	1,554	1,435	718
4	44,955	3,747	1,874	1,730	865
5	52,614	4,385	2,193	2,024	1,012
6	60,273	5,023	2,512	2,319	1,160
7	67,951	5,663	2,832	2,614	1,307
8	75,647	6,304	3,152	2,910	1,455
For each additional person:	7,696	642	321	296	148

PLEASE NOTE:
If your income changes, contact the district food and nutrition services office at 563/552-3237 to update your information.

If you have questions regarding this form, please call your child’s school or the district food and nutrition services office at 563/552-3237.



FEE WAIVER BENEFITS

FOR 2016-2017

Your child(ren) may qualify for other benefits if your household meets federal income guidelines based on the National School Lunch Program (NSLP). You may choose to allow the district to determine eligibility for a waiver of school fees or transportation assistance. To do so, you must waive the confidentiality of free and reduced-price meal status or eligibility status given by the NSLP for this purpose by selecting the appropriate box below.

IMPORTANT: If you have questions, please call your child's school or the district food and nutrition services office at 563/552-3237.

WAIVER SELECTION

YES, I WOULD LIKE TO BE CONSIDERED FOR A FEE WAIVER

Selecting this option means I would like to receive a school fee waiver for my child(ren). School personnel may release my child(ren)'s eligibilty status to Dubuque Community School District officials to determine eligibility for waivable fees including: district textbook, assignment notebook, cap and gown, instrument rental, and driver's education (one time only).

NO, I DECLINE THE SCHOOL FEE WAIVER

Selecting this option means that I have read and understand the waiver benefits outlined above and am selecting to decline the school fee waiver.

STUDENT INFORMATION

NAME:	SCHOOL ATTENDING:
NAME:	SCHOOL ATTENDING:
NAME:	SCHOOL ATTENDING:
NAME:	SCHOOL ATTENDING:
NAME:	SCHOOL ATTENDING:

PLEASE SIGN BELOW

By signing below, I certify that I am the parent/guardian of the child(ren) for whom the assistance is being requested. I agree to the terms of the option I have selected above and understand that, if approved, my eligibility status will be used in school fee waiver or transportation assistance decisions.

PARENT / GUARDIAN SIGNATURE

DATE