



1453 Locust Lake Rd · Amelia, Ohio 45102

September 12, 2017


Dear Parents and Guardians,

All of our school families are asked to review and complete the attached student income form. The Archdiocese requires us to account for one from every family. This information is very important to ensure our continued participation in the Federal programs. These programs provide a variety of materials and services for the children, teachers, and our school. It is one of the few benefits our children receive from your tax dollars and we do not want to lose it.

Parents/Guardians, please return the form to school by Tuesday, September 19, 2017. It is kept in my office long enough to tally the number of families who qualify, both for the Archdiocese, and the Federal programs. No financially specific information is kept, and all remains confidential.

Thank you for your assistance and cooperation with this form. There are some questions frequently asked on the reverse of this letter. Please feel free to contact me if you have any questions.

Sincerely,


Lizanne Ingram
Principal

P.S. Please make sure you consult both sides of the attached form. If your income qualifies you for free or reduced lunch prices, the family size and income must be circled on the chart. This information is destroyed as soon as our entire school's data is compiled.

Please see the reverse side for additional information.



STUDENT INCOME FORM

Why should you complete the student income form if your child does not eat school meals?

In order to receive money for e-rate, technology, and connectivity this form must be completed by each family. The income levels do affect other federal programs from which our school benefits.

For eligible elementary schools, the amount of federal funds your school building receives is dependent on the return of this completed form. These funds, known as Title I, pay for additional educational services for students who are failing or at risk of failing to meet the same high standards as everyone else in the school. Our district provides additional tutoring in reading and mathematics. Title I requires that funds be given to schools based on the number of children from low-income families.

While the amount of money each school receives depends on the number of children from low-income families, the tutoring services are based on the academic need of the students regardless of income level.

What happens if you fill out this form?

- Your name will not be given out to anyone except your district.
- Your school building may be able to get more money.
- That money may be used:
 - to hire teachers
 - to buy materials
 - for technology
 - for connectivity
- Your child or other children may get extra help with reading and mathematics at the elementary level



United States Department of Agriculture (USDA)

INCOME ELIGIBILITY GUIDELINES

Effective July 1, 2017 through June 30, 2018

Households with total incomes less than or equal to the values below are eligible for free or reduced-price meals.

Directions: Please circle the number in the chart below that corresponds to your household size and pay frequency.

Total Number of people living in the household	Total household income and frequency	Household Size	FREE				
			Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
_____	\$ _____ <input type="checkbox"/> Annual <input type="checkbox"/> Monthly <input type="checkbox"/> Twice per month <input type="checkbox"/> Every two weeks <input type="checkbox"/> Weekly	1	\$15,678	\$1,307	\$654	\$603	\$302
		2	21,112	1,760	880	812	406
		3	26,546	2,213	1,107	1,021	511
		4	31,980	2,665	1,333	1,230	615
		5	37,414	3,118	1,559	1,439	720
		6	42,848	3,571	1,786	1,648	824
		7	48,282	4,024	2,012	1,857	929
		8	53,716	4,477	2,239	2,066	1,033
		Each additional family member add	+5434	+453	+227	+209	+105

Total Number of people living in the household	Total household income and frequency	Household Size:	REDUCED				
			Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
_____	\$ _____ <input type="checkbox"/> Annual <input type="checkbox"/> Monthly <input type="checkbox"/> Twice per month <input type="checkbox"/> Every two weeks <input type="checkbox"/> Weekly	1	\$22,311	\$1,860	\$930	\$859	\$430
		2	30,044	2,504	1,252	1,156	578
		3	37,777	3,149	1,575	1,453	727
		4	45,510	3,793	1,897	1,751	876
		5	53,243	4,437	2,219	2,048	1,024
		6	60,976	5,082	2,541	2,346	1,173
		7	68,709	5,726	2,863	2,643	1,322
		8	76,442	6,371	3,186	2,941	1,471
		Each additional family member add	+7,733	+645	+323	+298	+149

INCOME CONVERSION:

Weekly Income **x 52 = Annual income**

Every 2 Weeks Income (Every other week, Bi-weekly) **x 26 = Annual income**

Twice a Month Income (Bi-monthly) **x 24 = Annual income**

THIS CHART IS TO BE USED BY INSTITUTIONS, SCHOOLS, CENTERS AND SPONSORING ORGANIZATIONS TO APPROVE AND CATEGORIZE COMPLETE APPLICATIONS FOR FREE AND REDUCED-PRICED MEALS

USDA is an equal opportunity provider and employer

PLEASE COMPLETE BOTH SIDES AND RETURN BY TUESDAY, SEPTEMBER 19.



Dear Parent/Guardian:

In accordance with the guidelines, does your household qualify for Free Lunch, Reduced Lunch, or neither? (check one and complete form)

Free Lunch _____

Reduced Lunch _____

Does not qualify for Free or Reduced Lunch _____

Name: _____

Address: _____

City, State, Zip _____

By signing below I verify the information I have given on this form:

Signature: _____ Date: _____

PLEASE COMPLETE BOTH SIDES AND
RETURN BY TUESDAY, SEPTEMBER 19.