



Solon City Schools
Food Service Department

33800 Inwood Road
Solon, Ohio 44139
(440) 349-7703

2019-2020 FREE & REDUCED LUNCH INFORMATION SCHOOL FEE WAIVER INFORMATION

Welcome to the 2019-20 school year. Children need healthy meals to learn. The Solon Schools offer healthy meals every school day. The lunch prices are as follows: \$3.40 for grades K-6 and \$3.65 grades 7-12. Your children may qualify for free meals or for reduced priced meals. Reduced prices are: \$0.40 for lunch.

Please review the following information carefully. **Students who qualify for free or reduced lunches also qualify for free or reduced fees.** This includes a complete waiver of fees for students who qualify for free lunches. **A NEW APPLICATION MUST BE APPROVED FOR THE 2019-20 SCHOOL YEAR IN FORDER TO RECEIVE THE WAIVER FOR FREE OR REDUCED FEES.** There are two methods for qualification:

1. DIRECT CERTIFICATION

- a. If you received a letter stating that your student is **ELIGIBLE FOR DIRECT CERTIFICATION, YOU DO NOT** need to fill out an application for free or reduced lunches. Your student is automatically eligible for free lunches and the fee waiver.
- b. All children living in the household with a student who qualifies under Direct Certification are also eligible for free lunches and fee waivers. Please contact Lynne Hutchison, Solon Food Service Director, at (440) 349-7703, if there are additions in the household that were not listed in the letter.

2. ONLINE APPLICATION PROCESS

This year we are processing our Free & Reduced applications online. Please go to the Solon Schools' website at www.solonschools.org and click on the Free & Reduced Lunch link under the Parents tab.

- You only need to complete one application for all the students living in your household regardless of which school they attend.
- You will need your students' Solon student ID numbers to complete the application.
- Once you have filled out the application, you will receive confirmation of qualifying within 12-48 hours.

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

INCOME ELIGIBILITY GUIDELINES			
Household size	Yearly	Monthly	Weekly
1	\$23,107	\$1,926	\$445
2	31,284	2,607	602
3	39,461	3,289	759
4	47,638	3,970	917
5	55,815	4,652	1,074
6	63,992	5,333	1,231
7	72,169	6,015	1,388
8	80,346	6,696	1,546
Each additional person:	8,177	682	158

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 are not required to provide information, but if information is not provided, the state agency 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 is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Ohio Works First (OWF) case number or other 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.

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, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

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 Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#), (AD-3027) found online at: [How to File a Complaint](#), 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
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: program.intake@usda.gov.

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