

Gateway Charter High School

Announces its policy for Free and Reduced Price Meals for students under the

NATIONAL SCHOOL LUNCH AND BREAKFAST PROGRAMS.

Any interested person may review a copy of the policy by contacting

GCHS / 239-768-3350 / 12770 Gateway Blvd., Fort Myers, FL 33913

Household size and income criteria will be used to determine eligibility. These criteria can be found on the second page of this document. Children from families whose income is at or below the levels shown may be eligible for Free or Reduced Price Meals. An application can not be approved unless it contains complete eligibility information. Once approved, meal benefits are good for an entire year. You need not notify the organization of changes in income and household size.

Application forms are being sent to all homes with a letter to parents or guardians. To apply for Free or Reduced Price Meals, households must complete the application and return it to the school. Additional copies are available at the principal's office in each school. The information provided on the application will be used for the purpose of determining eligibility and may be verified at any time during the school year. Applications may be submitted at any time during the year.

Households that receive Food Stamps or TANF (Temporary Assistance to Needy Families) are required to list on the application only the child's name, Food Stamp / TANF case number, and signature of adult household member.

Foster children may receive benefits based on the child's personal income regardless of the income of the household.

Household with children who are considered migrants, homeless, or runaway should contact the district liaison.

For the purpose of determining household size, deployed service members are considered a part of the household. Families should include the names of the deployed service members on their application. Report only that portion of the deployed service member's income made available to them or on their behalf to the family. Additionally, a housing allowance that is part of the Military Housing Privatization Initiative is not to be included as income.

All other households must provide the following information listed on the application:

- Total household income listed by amount received and type of income and how often the income is received (wages, child support, etc.) received by each household member;
- Names of all household members;
- Signature of an adult household member certifying the information provided is correct; and
- Social security number of the adult signing the application or the word "NONE" for this household member if he or she does not have a social security number.

If a household member becomes unemployed or if the household size changes, the school should be contacted. Children of parents or guardians who become unemployed should also contact the school. Such changes may make the student eligible for reduced price or free meals if the household income falls at or below the levels shown below.

Under the provisions of the Free and Reduced Price meal policy, Jennifer Westbrook, Director of the National School Lunch Program for GCHS will review applications and determine eligibility. If a parent or guardian is dissatisfied with the ruling of the official, he or she may wish to discuss the

decision with the determining official on an informal basis. If the parent wishes to make a formal appeal, he or she may make a request either orally or in writing to Ken Haiko, Chairman of the Lee Charter Foundation, 6278 N. Federal Highway, #384, Fort Lauderdale, FL 33308.

Unless indicated otherwise on the application, the information on the Free and Reduced Price Meal application may be used by the school system in determining eligibility for other educational programs.

**FLORIDA INCOME ELIGIBILITY GUIDELINES
FOR FREE AND REDUCED PRICE MEALS**

Effective from July 1, 2007, to June 30, 2008

Free Meal Scale is 130% of Federal Poverty Level					
Household size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	13,273	1,107	554	511	256
2	17,797	1,484	742	685	343
3	22,321	1,861	931	859	430
4	26,845	2,238	1,119	1,033	517
5	31,369	2,615	1,308	1,207	604
6	35,893	2,992	1,496	1,381	691
7	40,417	3,369	1,685	1,555	778
8	44,941	3,746	1,873	1,729	865
Each additional family member, add	4,524	377	189	174	87
Reduced Meal Scale is 185% of Federal Poverty Level					
Household size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	18,889	1,575	788	727	364
2	25,327	2,111	1,056	975	488
3	31,765	2,648	1,324	1,222	611
4	38,203	3,184	1,592	1,470	735
5	44,641	3,721	1,861	1,717	859
6	51,079	4,257	2,129	1,965	983
7	57,517	4,794	2,397	2,213	1,107
8	63,955	5,330	2,665	2,460	1,230
Each additional family member, add	6,438	537	269	248	124

To determine annual income:

- If you receive the income every week, multiply the total gross income by 52.
- If you receive the income every two weeks, multiply the total gross income by 26.
- If you receive the income twice a month, multiply the total gross income by 24.
- If you receive the income monthly, multiply the total gross income by 12.

Remember: The total income before taxes, social security, health benefits, union dues, or other deductions must be reported.

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