



# MAINE TOWNSHIP HIGH SCHOOL SOUTH

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Dear Parent or Guardian:

RE: Fee Waiver Application Process

The purpose of this correspondence is to inform you of the school district's programs for free or reduced-price meals and waivers of school fees for the 2017-18 school year. For those interested in applying for a fee waiver, applications **must** be submitted no later than **Friday, July 7, 2017**. Your application will be reviewed and you will be notified if your application has been approved or denied no later than Monday, July 10, 2017.

To apply for a fee waiver please provide the following:

(1) a completed application form (included in this mailing) **AND** (2) documentation of your household's gross income. **Fee Waiver applications may be mailed or dropped off to Maine South High School no later than Friday, July 7, 2017. If you want to drop off your materials in person, please note that materials must be dropped off in the main office at Maine South High School anytime from 7:30 a.m. to 3:30 p.m. Monday through Thursday.** It is extremely important that you apply during this time period. While applications will be accepted at any time, they are effective on the date that they are approved and are not retroactive to the beginning of the school year.

**Free/Reduced Price Meals:** Maine South High School offers healthy meals every school day. Your child/children may qualify for free or reduced-price meals. The reduced-price meal is \$1.00 for breakfast and \$1.75 for lunch.

**Waiver of School Fees:** The Board of Education waives all school fees assessed by the district for a student's required participation in any curricular or extracurricular program, as long as the parent/guardian meets the eligibility. "School fees" are defined in the Board's policy as "any monetary charge collected by the school or district from a student as a prerequisite for the student's participation in curricular and/or extracurricular programs of the school or district." A school does not impose a "fee" when it requires a student to provide his/her own ordinary supplies or materials (pencil, paper, notebook)

**School fees include, but are not limited to, costs for:**

- All charges for required textbooks and instructional materials;
- All charges and deposits collected by a school for use of school property (locks, towels, other general fees);
- Charges for field trips made during school hours or after school hours if the field trip is a customary part of a class;

- Charges or deposits for uniforms or equipment related to interscholastic athletics, teams organized for inter-scholastic participation, intramurals or fine arts programs;
- Charges to participate in extra-curricular activities;
- Supplies required for a particular class;
- Graduation fees;
- School records fees;
- Driver education fees assessed pursuant to Section 27-23 of The School Code;
- Identification badge fee;
- Technology fee;
- Activity fee.

**School fees do not include:**

- Library fines and other charges made for the loss, misuse or destruction of school property;
- Replacement cost of lost identification badge;
- Charges for the purchase of class rings, yearbooks, pictures or similar items;
- Charges for optional travel undertaken by a school club or group of students outside of school hours;
- Charges for admission to school dances, athletic events or other social events;
- Personal items for athletic/intramural/extracurricular events such as athletic shoes, baseball gloves, etc.

With respect to the Application Form, please note that although there is a space on the Application Form for your Social Security number, you are not required to provide a Social Security number if you do not have one. You should check the box indicating that you do not have a Social Security number if you do not have one. Note that the District will not use or share with a third party your Social Security number or information regarding your lack of a Social Security number for any reason unrelated to your request for free or reduced-price meals or a fee waiver.

With respect to the documentation of your household's gross income, **you must provide ONE of the following:**

- All 2016 Federal tax returns (IRS Form 1040) for each working household member who has such a form, including copies of all 1099s and W-2's. Note that the District will not use or share with any third party your tax forms or any information regarding your lack of tax forms for any reason unrelated to your request for free or reduced-price meals or a fee waiver; **OR**
- Evidence of participation in TANF (Temporary Assistance for Needy Families) or Supplemental Nutrition Assistance Program (SNAP); **OR**
- Evidence the student is a foster child. **OR**
- If you are unable to provide any of the information listed above, please contact the Associate Principal.

Here are answers to questions you may have about applying under these methods:

**1. Do I need to fill out an application for each child?**

No. Use one Household Eligibility Application for all students in your household. We cannot approve an application that is not complete, so be sure to fill out all required information.

**2. Who can get free/reduced meals and a school fee waiver?**

Children in households receiving Supplemental Nutrition Assistance Program (SNAP) or Temporary Assistance for Needy Families (TANF) and foster children receive these items regardless of income. Also, if your household income is within the limits on the Federal Income Chart your children are eligible.

**3. My child's application was approved last year. Do I need to fill out another one?**

Yes. Your child's application is only good for that school year.

**4. If I do not qualify now, may I apply later?**

Yes. You may apply at any time during the school year. While applications will be accepted at any time, they are effective on the date that they are approved and are not retroactive to the beginning of the school year.

**5. Who should I include as members of my household?**

You must include all people living in your household, related or not (such as grandparents, other relatives, or friends). You must include yourself and all children who live with you.

**6. I get WIC. Can my child(ren) get free meals?**

Children in households participating in WIC may be eligible for free or reduced price meals. Please fill out the enclosed application.

Illinois Revised Statutes, Chapter 38, Paragraph 17-6 provides that supplying false information to obtain a fee waiver is a Class 4 felony.

We will review and verify the information you submit. If you provide the requested documentation, we should be able to tell you immediately if your fee waiver request has been granted or denied. If your fee waiver request is denied, and your family circumstances change, such as a decrease in household income, an increase in household size, unemployment or receiving food stamps or TANF for your children, you may reapply for a waiver at any time during the school year. If your household income increases or family size decreases, you are obligated to report this change to my office immediately.

A denial of a fee waiver request by the Associate Principal may be appealed to the Assistant Superintendent of Business by submitting a written appeal within ten (10) school days of the denial by the Associate Principal. The Assistant Superintendent for Business shall decide the parent's appeal within thirty (30) days of the receipt of the parent's written request for appeal. The decision of the Assistant Superintendent of Business is final and binding.

If you have any questions regarding the free and reduced-price meals or fee waiver request process, please call the school.

Sincerely,

George A. Dages  
Associate Principal  
[gdages@maine207.org](mailto:gdages@maine207.org)

Enclosure:  
Application Instructions  
Free/Reduced Waiver Application

**Maine Township High School District 207**  
**2017-18 FREE/REDUCED PRICE MEALS & FEE WAIVER**  
**APPLICATION INSTRUCTIONS**

To apply for free and reduced-price meal services and/or fee waiver, complete the application using these instructions. Sign the application and return to the school.

**(1) APPLICANT INFORMATION** *All Households Complete Section (1).*

- A. Print the name or names of the child(ren) you are applying for.
- B. List each child's student ID number.
- C. TANF case number-if applicable. List a current TANF case number or SNAP number for each child. Attach a copy of TANF/SNAP card(s) to application. *Link card number cannot be used. Skip to (6).*
- D. Check if the application is for a foster child. Attach a copy of the front and back of child's medical card. *Skip to (6).*

**(2) HOMELESS, MIGRANT, RUNAWAY OR HEAD START** *(Categorically eligible)*

- A. Check box (if applicable) of student on application.
- B. Get corresponding signature. Go on to Section (3).

**(3) TOTAL HOUSEHOLD INCOME**

- A. Write the names of everyone in your household, whether they receive income or not. Include yourself, the children you are applying for, all other children, your spouse, grandparents, and other related and unrelated people in your household. Use another piece of paper if you need more space. Check the box at right if the member does not have any income.
- B. Fill in each persons total income and attach a copy of the most recent (2016) tax return - IRS Form 1040 and all W-2's/1099's for each household member where applicable. If there is no tax return, but the household member is employed, please state reason for no tax return. **Your application may be denied if you do not provide a copy of the 2016 tax return and all W-2's/1099's for each employed household member.**
- C. You must complete a **4506-T Request for Transcript of Tax Return Form** for each working household member that cannot provide a tax return. (1) Fill out the Student ID line at the top of the page. (2) Complete all items in Sections 1 through 4 as applicable. (3) Sign on the first signature line (only one signature is required); (4) date, (5) phone number.
- D. Skip to (6).

**(4) (5) CHILDREN'S RACIAL AND ETHNIC IDENTITIES and All Kids Information**

Answer these questions if you choose to.

**(6) SIGNATURE AND SOCIAL SECURITY NUMBER** *All Households Complete This Part.*

- A. All applications must have the signature of an adult household member.
- B. The adult signing the form must also list the last four numbers of his/her social security number.
- C. If the adult does not have a social security number, mark the box indicating "I do not have a Social Security number."
- D. A social security number is not required if you are applying with a SNAP or TANF case number or if you are applying for a foster child.
- E. **If there is no social security number and the box indicating such is not checked, the application will be denied.**

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**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 do not have to give the information, but if you do not, we 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 on a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR 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.

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**Non-discrimination Statement: This explains what to do if you believe you have been treated unfairly.** "In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339, or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer."

## MAINE TOWNSHIP HIGH SCHOOL DISTRICT 207

### Free/Reduced Price Meals and Fee Waiver 2017-2018 Income Eligibility Guidelines

The United States Department of Agriculture has issued the following income guidelines for the period July 1, 2017, through June 30, 2018:

<b>FREE Meals/Fee Waiver</b>						<b>REDUCED Price Meals/Fee Waiver</b>					
Household Size	Annual Income	Monthly Income	Twice Per Month	Every 2 Weeks	Weekly Income	Household Size	Annual Income	Monthly Income	Twice Per Month	Every 2 Weeks	Weekly Income
<b>1</b>	\$15,678	\$1,307	\$654	\$603	\$302	<b>1</b>	\$22,311	\$1,860	\$930	\$859	\$430
<b>2</b>	21,112	1,760	880	812	406	<b>2</b>	30,044	2,504	1,252	1,156	578
<b>3</b>	26,546	2,213	1,107	1,021	511	<b>3</b>	37,777	3,149	1,575	1,453	727
<b>4</b>	31,980	2,665	1,333	1,230	615	<b>4</b>	45,510	3,793	1,897	1,751	876
<b>5</b>	37,414	3,118	1,559	1,439	720	<b>5</b>	53,243	4,437	2,219	2,048	1,024
<b>6</b>	42,848	3,571	1,786	1,648	824	<b>6</b>	60,976	5,082	2,541	2,346	1,173
<b>7</b>	48,282	4,024	2,012	1,857	929	<b>7</b>	68,709	5,726	2,863	2,643	1,322
<b>8</b>	53,716	4,477	2,239	2,066	1,033	<b>8</b>	76,442	6,371	3,186	2,941	1,471
<b>For each additional family member, add:</b>						<b>For each additional family member, add:</b>					
	5,434	453	227	209	105		7,733	645	323	298	149

The following is the definition of income: **Income is defined as any monies earned before any deductions such as income taxes, social security taxes, insurance premiums, charitable contributions, and bonds. It includes the following:**

- Monetary compensation for services including wages, salary, commissions, or fees;
- Net income from non-farm self-employment;
- Net income from farm self-employment;
- Social security;
- Dividends or interest on savings or bonds or income from estates or trusts;
- Net rental income;
- Public assistance or welfare payments;
- Unemployment compensation;
- Government civilian employee or military retirement or pensions or veteran payments;
- Private pensions or annuities;
- Alimony or child support payments;
- Regular contributions from persons not living in the household;
- Net royalties;
- Other cash income - Other cash income would include cash amounts received or withdrawn from any source including savings, investments, trust accounts, and other resources which would be available to pay the price of a child's meal.

**Maine Township High School District 207**  
**2017-2018 FREE/REDUCED PRICE MEALS AND FEE WAIVER APPLICATION**

APPLYING FOR:       Free/Reduced Price Meals       Fee Waiver

**(1) APPLICANT INFORMATION**

Names of All Children in School <i>First - Middle - Last</i>	Student ID#	Food Stamp or TANF Case Number (if any, per child). If you list a SNAP or TANF Case Number, <u>you must attach a current copy of IDHS Benefits Eligibility Letter with Case Number included</u> , then Skip to (6)	Check if Foster Child*

\* You must attach a copy of the front & back of the foster child's medical card.

**(2) HOMELESS, MIGRANT, RUNAWAY or HEAD START (Categorically eligible)**

Homeless     Migrant     Runaway     Head Start

\_\_\_\_\_  
*Signature of Your School Homeless Liaison,  
Migrant Coordinator or Head Start Director*      Date

**(3) TOTAL HOUSEHOLD GROSS INCOME - before deductions You must tell us how much and how often.**

NAME (List everyone in household)	Social Security Number (enter last 4 numbers)	Date of Birth	Total Income from IRS 2016 Form 1040	Check If <u>NO</u> income
	X X X - X X -		\$	<input type="checkbox"/>
	X X X - X X -		\$	<input type="checkbox"/>
	X X X - X X -		\$	<input type="checkbox"/>
	X X X - X X -		\$	<input type="checkbox"/>
	X X X - X X -		\$	<input type="checkbox"/>
	X X X - X X -		\$	<input type="checkbox"/>

Attached is a copy of the 2016 IRS Form 1040 and all 1099's and W-2's for each working household member.  
 I did not file IRS Form 1040 because \_\_\_\_\_

**(4) CHILDREN'S RACIAL AND ETHNIC IDENTITIES (Optional)**

Mark one ethnic identity:

- Hispanic/Latino  
 Not Hispanic/Latino

Mark one or more racial identities:

- Asian       Black or African American  
 White       American Indian or Alaska Native  
 Native Hawaiian or Other Pacific Islander

**(5) Sharing Application Information with All Kids – All Kids is a complete healthcare program for every child in Illinois.**

No! I DO NOT want information from my Household Eligibility Application shared with All Kids. \_\_\_\_\_  
Sign here

**(6) SIGNATURE AND SOCIAL SECURITY NUMBER (Adult must sign)**

An adult household member must sign the application. The adult signing the form must also list his/her social security number or mark the "I do not have a social security number" box.

Social Security Number: X X X - X X - \_\_\_\_ \_\_\_\_ \_\_\_\_       I do not have a social security number.

I certify (promise) that all the information on this application is true and that all household income is reported.  
I understand that the school officials may verify (check) the information.

I understand that if I purposely give false information, my children may lose benefits, and I may be prosecuted.

\_\_\_\_\_  
Date      Printed Name of Adult Household Member      Signature of Adult Household Member

\_\_\_\_\_  
Address of Adult Household Member      City      Zip Code