## 2022-2023 Household Application for Free and Reduced-Price School Meals

Application at http://www.rapidriver.k12.mi.us

One application per household. Please use a pen (not a pencil)

Printed Name of Adult Signing Form	Street Address (if available)	"I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal Funds, and that school officials may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws".	ormation and	tal Household Mombon	4)		1)	PLEASE PRINT  Name of Adult Household Members (First and Last) Ear	List all Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they do receive income, report total gross income (before source in whole dollars (no cents) only. If they do not receive income from any source, write "0". If you enter "0" or leave any fields blank, you are certifying (promising) that there is no income to receive	B. All Adult Household Members listed in STEP 1 here	Sometimes children in the household earn or receive income. Please include the TOTAL income received by	OD :	Unsure what income to include here? Fire the page and animate the	If NO > Go to STEP 3. If YES > Write a case number here, then go to STEP 4 (Do not complete STEP 3).	5)	4)	3)	2)	1)	Child's First Name  MI Child's Last Name  Student?	Definition of Household Member. "Anyone who is living with you and shares income and expenses, even if not related". Children in Foster care and children who meet definition of Homeless, Migrant or Runaway are eligible for free meals. Read How to Annily for Free and Boding of Homeless, Migrant or Runaway.
	Apt#	application is true a	st Four Digits of So imary Wage Earne					Earnings from Work Ho	P 1 (including your	d in STEP 1 here.	r receive income, P	help you with the /		irs (including ya le a case number						MI C	who is living with y
Signature of Adult	City	and that all income in false information, r	Last Four Digits of Social Security Number (SSN) of Primary Wage Earner or Other Adult Household Member adult Signature Mail Completed Form to: F				Weekly Bi-Weekly 2x Month	How Often?	self) even if they do come from any soun	3	lease include the To	the charts titled, "Sc All Adult Household		here, then go to S						Child's Last Name	ou and shares incor
		s reported. I unders ny children may los	S 1		. \$	   	Monthly	<u>′</u>	not receive income ce, write "0". If you e		OTAL income receiv	Members Section.	"YES" to STEP 2	hold Members (including you) currently participate in one or more of the lif YES > Write a case number here, then go to STEP 4 (Do not complete STEP 3).						ne	icome and expenses, e
	State	tand that this inform e meal benefits, and	d River Public Scho				Annually Alimony/Child Support Weekly	Diblic Assistance/ Linux	. For each Househo enter "0" or leave an	40		or more information.	ES" to STEP 2)	plete STEP 3).				] [	Yes No	information. PLEA Student?	ven if not related". C
	Zip	nation is given in cor	Check If no SSN				kly Bi-Weekly 2x Month		ld Member listed, if y fields blank, you a	<b>€</b> 9	Child Income	The "Sources of Inc	X Total State of the last of t	Case Number:						School School	related". Children in Foster ca
Today's Date		nnection with the read under applicable	no SSN	n 60	] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [		Monthly Annually	( )	they do receive inco		How Ofte	come for Children" o	(Write o	rams:							ire and children who
	Daytime Phone and Email (Optional)	ion is given in connection with the receipt of Federal Funds, a may be prosecuted under applicable State and Federal laws"					Pensions/Retirement/ How Often?  Annually All Other Income Weekly Bi-v		Member listed, if they do receive income, report total gross income (before taxes) for each telds blank, you are certifying (promising) that there is no income to receive		How Often? Please put an X Weekly Bi-Weekly 2x Month Monthly	ne "Sources of Income for Children" chart will help you with the Child Income section.	(Write only one case number in this space)	SNAP, TANF, or FDPIR					Grade		meet definition of H
	Email (Optiona	ds, and that sch					Offen? / Bi-Weekly 2x Month	Sincolle to lebc	ss income (befo		hlv Annually	th the Child Inco	ber in this sp	PIR					Child Mig		domeless, Migrant o
		nool officials may					onth Monthly Annually	Ē	ore taxes) for each			ome section.	vace)		] [				Homeless Migrant, Runaway		rant or Runaway