

Dear Parent/Guardian:

Children need milk to learn. [School Name] offers milk every school day. Students may buy milk for \$_____. Your children may qualify for free milk.

1. DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD?

No. Complete one Free School Milk Family 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. Return the completed application to: [name, address, and phone number].

2. WHO CAN GET FREE MILK?

Children in households getting Food Assistance Program (FAP), Family Independence Program (FIP), or Food Distribution Program on Indian Reservations (FDPIR) and most foster children can get free milk regardless of your income. Also, your children can get free milk if your household income is within the free limits on the Federal Income Guidelines.

3. CAN FOSTER CHILDREN GET FREE MILK?

Yes, foster children that are under the legal responsibility of a foster care agency or court are eligible for free milk. Any foster child in the household is eligible for free milk regardless of income.

4. CAN HOMELESS, MIGRANT, AND RUNAWAY CHILDREN GET FREE MILK?

Yes, children who meet the definition of homeless, runaway, or migrant, qualify for free milk. If you have not been informed that your children will get free milk, please call [name and phone number], Homeless Liaison or Migrant Coordinator, to see if your child(ren) qualify.

5. SHOULD I FILL OUT AN APPLICATION IF I GOT A LETTER THIS SCHOOL YEAR SAYING MY CHILD(REN) ARE APPROVED FOR FREE MILK?

Please read the letter you received carefully and follow any instructions provided. Call the school at [phone number] if you have questions.

6. 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 and for the first few days of this school year. You *must* send in a new application unless the school told you that your child is eligible for the new school year.

7. I GET WOMEN, INFANTS & CHILDREN (WIC). CAN MY CHILD(REN) GET FREE MILK?

Children in households participating in WIC may be eligible for free milk. An application must be filled out by WIC households.

8. WILL THE INFORMATION I GIVE BE VERIFIED?

Yes, we may ask you to send written proof of any information provided on the application.

9. IF I DON'T QUALIFY NOW, MAY I APPLY LATER?

Yes. You may apply at any time during the school year if your household size goes up, income goes down, or if you start getting FAP, FIP, FDPIR, or other benefits. If you lose your job, your child(ren) may be able to get free milk.

10. WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION?

You should talk to school officials. You also may ask for a hearing by calling or writing to: [name, address, phone number, and e-mail].

11. MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN?

Yes. You or your child(ren) do not have to be a U.S. citizen to qualify for free milk.

12. 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) who share income and expenses. You must include yourself and all children who live with you. If you live with other people who are economically independent (for example, people who you do not support, who do not share income with you or your children, and who pay a pro-rated share of the expenses), do not include them.

13. WHAT IF MY INCOME IS NOT ALWAYS THE SAME?

List the amount that you normally receive. For example, if you normally receive \$1,000 each month, but you missed some work last month and only received \$900, put down that you receive \$1,000 per month. If you normally get overtime, include it, but not if you get it only sometimes.

14. WE ARE IN THE MILITARY. DO WE INCLUDE OUR HOUSING ALLOWANCE AS INCOME?

If you get an off-base housing allowance, it must be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income.

15. MY SPOUSE IS DEPLOYED TO A COMBAT ZONE. IS HIS/HER COMBAT PAY COUNTED AS INCOME?

No, if the combat pay is received in addition to his/her basic pay because of his/her deployment and it wasn't received before he/she was deployed, combat pay is not counted as income. Contact your school for more information.

16. WHAT IF MY CHILD(REN) DO NOT HAVE HEALTH INSURANCE?

Your child(ren) may qualify for low cost or free health insurance through MIChild and Healthy Kids Program. To apply online, go to www.michigan.gov/michild or call 1-888-988-6300 for help or to request a paper application.

17. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR?

To find out how to apply for Food Assistance Program (FAP) or other assistance benefits, contact your local assistance office or call 1-800-481-4989.

If you have other questions or need help, call [phone number].

Sincerely,

APPLICATION INSTRUCTIONS:
Your child(ren) may qualify for free milk if your household income falls within the limits on this chart.

Total Family Size	Annual	Monthly	Twice per Month	Every Two Weeks	Weekly
1	\$15,171	\$1,265	\$633	\$584	\$292
2	\$20,449	\$1,705	\$853	\$787	\$394
3	\$25,727	\$2,144	\$1,072	\$990	\$495
4	\$31,005	\$2,584	\$1,292	\$1,193	\$597
5	\$36,283	\$3,024	\$1,512	\$1,396	\$698
6	\$41,561	\$3,464	\$1,732	\$1,599	\$800
7	\$46,839	\$3,904	\$1,952	\$1,802	\$901
8	\$52,117	\$4,344	\$2,172	\$2,005	\$1,003
Each additional household member add:	\$5,278	\$440*	\$220*	\$203*	\$102*

IF YOUR ENTIRE HOUSEHOLD GETS FAP, FIP, OR FDP, FOLLOW THESE INSTRUCTIONS:

- Part 1: Skip this part.
- Part 2: List the name and case number for any household member (including adults) receiving FAP, FIP, or FDP.
- Part 3: List child(ren)'s name, grade, and building.
- Part 4: Skip this part.
- Part 5: Sign and date the form. A Social Security Number is not necessary.
- Part 6: Answer this question.

IF YOU ARE APPLYING FOR A HOMELESS, MIGRANT, OR RUNAWAY CHILD, check the appropriate category in part 1 and contact your Homeless Liaison or Migrant Coordinator. Fill out application by following instructions for ALL OTHER HOUSEHOLDS.

IF YOU ARE APPLYING FOR ONLY FOSTER CHILD(REN), FOLLOW THESE INSTRUCTIONS:

- Part 1: Skip this part.
- Part 2: Skip this part.
- Part 3: List the foster child(ren)'s name, circle Yes for foster child, and list grade and building.
- Part 4: Skip this part.
- Part 5: Sign and date the form. A Social Security Number is not necessary.
- Part 6: Answer this question.

FOLLOW THESE INSTRUCTIONS FOR ALL OTHER HOUSEHOLDS: (Includes households with WIC, homeless, migrant, runaway, and households with both foster and non-foster children.)

- Part 1: Complete if applicable.
- Part 2: Skip this part.
- Part 3: Follow these instructions to report ALL household members:
 - Column 1 - Names: List the first and last name of each person living in your household, related or not (such as grandparents, other relatives, or friends). You *must* include yourself and all children living with you. Be sure to include all children. Attach another sheet of paper, if needed.
 - Column 2 - Circle Yes if Foster Child: Circle Yes if applicable.
 - Column 3 - Grade: Fill in the grade for each child attending school.
 - Column 4 - Building Name: Fill in the building name for each child attending school.
- Part 4: GROSS INCOME: Use this section to report all income in your household from the previous month: Next to each person's first and last name, list each type of income received last month. *Next to the amount, circle how often the person received it (weekly, every 2 weeks, twice a month, or monthly).*
 - o All persons must claim some income, or indicate that they receive no income. If a person, including any child listed in part 3, does not have any income, then \$0 *must* be circled in the column labeled "Circle if NO Income."
 - o *Earnings from Work:* List the gross income each person earned from work. This is not the same as take-home pay. *Gross income is the amount earned before taxes and other deductions.* Net income should ONLY be reported for self-owned business, farm, or rental income.
 - o *Welfare, Child Support, and Alimony:* List the amount each person received last month.
 - o *Pensions, Retirement, and Social Security:* List the amount each person received last month.
 - o *All Other Income:* All Other Income includes Worker's Compensation, unemployment, strike benefits, Supplemental Security Income (SSI), Department of Veterans Affairs (VA) benefits, disability benefits, regular contributions from people who do not live in your household, personal income from foster children, and *any other income.*
- Part 5: An adult household member *must* sign and date the form, list the last four (4) digits of their *Social Security Number*, or check the box "I do not have a Social Security Number."
- Part 6: Answer this question.