

## **MAGGIE L. WALKER GOVERNOR'S SCHOOL MEAL CREDIT PROGRAM**

The food service operation at MLWGS does not participate in the National School Breakfast and Lunch Programs, and does not receive state or federal reimbursement of any kind. The operation is supported entirely by the sale of food items. This system allows students to select from a wide array of individual food items of their choice, as well as daily specials. Food items are priced individually and the total cost of a student meal depends on the items selected. The menu mix changes daily and a selection of hot and cold sandwiches and entrees, salads, side dishes, beverages, and desserts are for sale. A listing of prices is available from the cafeteria manager at MLWGS.

MLWGS does offer a credit program for students who may need financial assistance with their meals. In order for a MLWGS student to qualify for a credit toward the cost of lunch, they or their household must receive **Supplemental Nutrition Assistance Program (SNAP) and/or Temporary Aid for Needy Families (TANF)** from the Department of Social Services. **Foster, group home, and refugee children** also qualify for meal credits. There is no qualifying for meal credits under income guidelines.

If extraordinary circumstances or events affecting the income of your household apply to your current situation, please contact the Assistant Director at MLWGS to discuss the possibility of being approved for meal credit privileges on a temporary basis.

### **Duration of Eligibility for Meal Benefits**

A child's eligibility is in effect from the date of eligibility for the current school year and up to 30 operating days in the subsequent school year or until a new eligibility determination is made.

### **Initial Carry-over of Previous Year's Eligibility**

A student's documented eligibility for free or reduced price meals in the preceding school year will be carried over into the new school year to ensure access to program benefits while current eligibility determinations are made. The carry-over of a student's previous school year eligibility shall be valid for the first 30 operating days of the new school year.

### **Meal credits of \$5.00 for lunch are available. Assistance is given for a LUNCH meal only – one sandwich, salad or entrée, and one beverage, as a minimum**

(i.e., credit may not be used for the purchase of just beverages, side dishes, snacks, breakfast, or dessert items). The balance of the cost of the meal once the credit is applied is the responsibility of the student to pay for in cash. We encourage you to talk with your student about selecting foods wisely to help them eat a balanced diet.

**If you are interested in applying for the meal credit program, complete the application attached to this letter and return it to the school as soon as possible.** Information provided on the application may be verified with the Department of Social Services. The information you provide will be treated confidentially and will be used only for eligibility determination and verification of data. You will be notified by the Assistant Director if your MLWGS student is approved for the meal credit.

**Contact the Assistant Director at 804-354-6800 ext. 1001 if you have any questions about the application for meal credit.**

Adopted: April 24, 2014

Amended: May 21, 2015

Amended: September 14, 2017

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Cross Ref: Pol 7006 Free and Reduced Price Food Services

**MAGGIE L. WALKER GOVERNOR'S SCHOOL  
APPLICATION FOR MEAL CREDIT**

Please complete all requested information, any omission may cause a delay in determining a child's eligibility for the meal credit. Complete a separate form for each MLWGS student. The form must be signed by a parent or guardian. Then please sign and return to the Assistant Director of Operations in Office 100.

A. Student Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
\_\_\_\_\_  
Home Phone: \_\_\_\_\_ Home School Division: \_\_\_\_\_

B. Parent/Guardian/Full Name: \_\_\_\_\_  
Address: (if different from student's address): \_\_\_\_\_  
\_\_\_\_\_  
Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

(You do not have to give social security numbers, but if you refuse, your child may not receive meal credits. The social security numbers may be used to identify you for verifying the information you report on this application).

C. Check and complete all items below that currently pertain to the student named above.

1) \_\_\_\_\_ Foster Child/Group Home Resident/Refugee

2) \_\_\_\_\_ TANF (Temporary Aid Needy Families) payments are currently received for this child.  
On the line below, state the complete TANF number:  
\_\_\_\_\_

3) \_\_\_\_\_ This child is a member of a household that currently receives assistance through SNAP.  
On the line below, state the complete SNAP Case Number:  
\_\_\_\_\_

D. Release of Information by Welfare/Social Services Department for Verification Purposes:  
I hereby authorize the \_\_\_\_\_ (County/City) Department of Social Services to provide verification to the Maggie L. Walker Regional School Board of the receipt of TANF payments for the above named student, Foster Child status for the above named student, or receipt of food stamps (SNAP) for the household of the above named high school student. It is further understood and agreed that there may be a periodic re-verification of eligibility for these benefits and that a copy of this form may be provided to the department of social services.

E. Signature:  
I certify that the information provided above is correct and that the Department of Social Services identified above is authorized to verify benefits claimed on this application.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date