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.

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 \$3.00 for breakfast and \$5.00 for lunch are available. Assistance is given for meals only – breakfast is one entrée and one beverage as a minimum; lunch is 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 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: October 19, 2023

Amended: May 21, 2015 Amended: September 14, 2017 Amended: February 15, 2018

Cross Ref: Pol 7006 Food Services

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

Dear Parent/Guardian:

Every day that the school is open, MLWGS provides meals to students in need to support their socioemotional well-being. Please fill out this form, which is NOT a free lunch application. Rather, it will be used in partnership with the student's home school division to receive free lunch services and to determine eligibility for other financial support services offered by MLWGS.

Our food services operation is supported entirely by the sale of food items. This system allows students to select from a wide array of choice. Food items are priced individually, and the total cost of a student meal depends on the items selected. Menus are available online.

If you are interested in receiving free lunch services, complete the forms attached to this letter and return it to the school as soon as possible. Information you provide will be treated confidentially and will be used only for 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 (804) 354-6800 x2110 if you have any questions.

Indicators to determine other forms of financial assistance:

MLWGS students who request free lunch services may receive services related to **Supplemental Nutrition Assistance Program** (SNAP) and/or Temporary Aid for Needy Families (TANF) from the Department of Social Services or be a member of a **foster** or group home or may be refugee children. These students would also be identified for financial assistance for fees, supplies, and other expenses and would receive such assistance.

Duration:

A child's eligibility is in effect for the current school year and up to one month of the subsequent school year. A new form should be completed annually.

Frequently Asked Questions:

- 1) WHILE THE SCHOOL IS CLOSED, WHAT FOOD SERVICES ARE AVAILABLE? Our participating divisions have agreed to support students in their home counties with the food services they are providing to other students.
- 2) MY CHILD'S FORMS WERE PROCESSED LAST YEAR. DO I NEED TO FILL OUT NEW ONES? Yes, you should complete a new set of forms each school year.
- 3) MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN? Yes. You, your children, or other household members do not have to be U.S. citizens to receive free meals.
- 4) MY FAMILY NEEDS MORE ASSISTANCE. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for Virginia SNAP or other assistance benefits, contact your local assistance office or call (855) 635-4370.
- 5) WHAT IF I HAVE FURTHER QUESTIONS? For clarification you should contact: Dr. Lisa Williams at (804) 354-6800 x2110, or lisa.williams@gsgis.k12.va.us
- 6). You also may ask for a hearing by calling or writing to: Dr. Robert Lowerre (804) 354-6800 x2180; rlowerre@gsgis.k12.va.us.

Request for Assistance Directions: Please complete all requested information below. This form must be signed by a parent or guardian and then returned to the office of the Assistant Director (Room 211) within one month of the start of classes on campus.

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Student Information	Parent Information
Name:	Name:
Address:	Address (if different from student):
Home Phone:	Home Phone (if different):
Home School Division:	Work Phone:
Email Address:	Email Address:
Cell Phone:	Cell Phone:

Step 2: Do any household members, including yourself, currently participate in one of the following programs or hold one of the following statuses (check all that apply):

Signat	ature of Parent/Guardian: Date: _			
Note : Our meal program is not subsidized by the Federal government, therefore; income guidelines do not apply.				
0	O I am requesting that my child's home school division extend free lunch so MLWGS. Point of Contact Name:/Contact #:/	,		
0	O Statuses: Foster child, group home resident, or refugee child Point of Contact Name:/Contact #:			
0	 Temporary Aid to Needy Families (TANF) Case Number: 			
0	 Supplemental Nutrition Assistance Program (SNAP) Case Number: 			

Sharing Information with Other Programs

Parent/Gu Dea

Dear Parent/Guardian:				
To save you time and effort, the information you gave on your other programs for which your child(ren) may qualify. For the fishere your information. Sending in this form will not change when the same your information.	ollowing programs, we must have your permission to			
Yes! I DO want school officials to share information fro Director, who facilitates subsidies for class fees, student financial assistance.	t activities, and other requests for school-related			
Yes! I DO want school officials to share information from my Free Breakfast and Lunch Forms with the GReat Aspirations Scholarship Program, which provides free financial advice on scholarship programs, grants, and student loans.				
Yes! I DO want school officials to share information fro Counseling Department, which facilitates fee waivers or	·			
Yes! I DO want school officials to share information fro Technology Department, which facilitates programs to hotspots for internet access.				
If you checked yes to any or all of the boxes above, fill out the for the child(ren) listed below. Your information will be shared only	,			
Child's Name:	Grade Level:			
Child's Name:	Grade Level:			
Child's Name:	Grade Level:			
Signature of Parent/Guardian:	Date:			
Printed Name:				
Address:				

For more information, you may call the Assistant Director at MLWGS at (804) 354-6800 x2110 or email at <u>lisa.williams@gsgis.k12.va.us</u>. Return this form to Office 211 within one month of the start of classes on campus.