NOTICE TO HOUSEHOLDS OF APPROVAL/DENIAL OF BENEFITS

Dear Parent/Guardian:			DATE:	
You applied for free or reduced-	meals for the following	0		
Your application was:				
Approved for free mea	ls			
Approved for reduced	price meals at \$	for lunch, \$	for breakfast, and \$	for snacks
Denied for the following	ng reason(s):			
Income over	the allowable amoun	t		
Incomplete a	pplication because			
Other				
If you do not agree with the deci you wish to review the decision	sion, you may discus	s it with <mark>[school offi</mark>	cial's name] at [phone num]	ber] or at [e-mail address]. If
NAME:				
ADDRESS:				
PHONE NUMBER:	E-I	MAIL		
Sincerely,				
[signature]				
Name		Title	Date	

Non-Discrimination Statement: This explains what to do if you believe you have been treated unfairly. In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <u>https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf</u>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

 mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; or
fax:

 fax: (833) 256-1665 or (202) 690-7442; or
email:

program.intake@usda.gov

This institution is an equal opportunity provider.