

Re: Free Lunch Application

2025-2026

Dear Parent/Guardian:

This form can be used to qualify for TSA's Free Lunch Program.

- 1. Do I Need to fill out a FORM for each child? No. *Use one Household Income Form for all students in your household.* We cannot use a form that is incomplete, so be sure to fill out all required information. Return the completed form to: Susan Ogden, TSA Bookkeeper, PO Box 207, Sharon, VT, 05065.
- 2. Whom 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 living with you. If you live with other people who are economically independent (for example, people whom you do not support, who do not share income with you or your children, and who pay a pro-rated share of expenses), do not include them.
- 3. What if My income is not always the same? List the amount that you normally receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
- 4. 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.
- 5. 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 s/he was deployed, combat pay is not counted as income. Contact your school for more information.

If you have other questions or need help, call [802-763-2500].

Sincerely,

Mary Newman Head of School

2025 – 2026 Fee Waiver and Free Lunch Application

The Sharon Academy, Sharon VT, 05065

This form can be used to qualify for TSA's Free Lunch Program. Once you complete the form, please return it to: Susan Ogden, TSA Bookkeeper, PO Box 207, Sharon, VT, 05065.

In Section 1, check the box that shows the number of people in your household. Be sure to include all children and adults, related and un-related, that live in a single dwelling and share income and expenses.

- 1. **In Section 2, check the box that shows the range of annual income for all people in your household.** Make sure to include all the following income sources: work, welfare, child support, alimony, pensions, retirement, Social Security, SSI, VA benefits, child income and/or all other income. The amount should be before any deductions for taxes, insurance, medical expenses, child support, etc.
- 2. In Section 3, check the appropriate box if your household receives benefits from one of these programs.

1. Total No. of people in house	ehold	2. Select the appropriate range (Include all income sources liste	ge of combined annual income for all people ed above before taxes.)	e in the household	
		This income level qualifies for the Free Lunch and Fee Waiver		Above Income	
				Do Not Qualify	
□ 1		☐ At or below \$28,953		☐ Above \$28,953	
<u> </u>		☐ At or below \$39,128		☐ Above \$39,128	
3		☐ At or below \$49,303		☐ Above \$49,303	
□ 4		☐ At or below \$59,478		☐ Above \$59,478	
□ 5		☐ At or below \$69,653		☐ Above \$69,653	
□ 6		☐ At or below \$79,828		☐ Above \$79,828	
- 7		☐ At or below \$90,003		☐ Above \$90,003	
□ 8		☐ At or below \$100,178		☐ Above \$100,178	
		If household size is more than 8, list the household size and total annual income below.			
□ Size:		☐ Income:			
3. Indicate if your household receives assistance from one of these programs:			□ 3SquaresVT	□ Reach Up	

3. List all students in the household. If any child you are reporting is in universal PreK; a foster child; homeless, migrant (Migrant Education Program participant), a runaway; or attends Head Start, please check the appropriate box.

				Public or Private Universal PreK	Foster	Homel ess, Migra nt,	H e a d S
						nt, Runaw	t
Ct. A. att. Finat		C 1.				ay	a
Student's First		Grade					r
Name	Student's Last Name	Level	School Child Attends				t

Contact information "I certify (promise)	on and adult signat		tion is true a	and that all inc	come is rep	orted	
Name of Adult Cor	mpleting the Form ((printed)					
 Signature		Today's Date					
Street Address (if a	vailable), Apt #	Ci	tv	State		p Cod	
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Daytime Phone		Email					
(Optional)		(Optional)	(Optional)				
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DO NOT	FILL OUT THIS	PART. THIS I	S FOR SC	HOOL USE	ONLI.		
DO NOT	Meets the free gui	idelines		-	OIVLI.		
Economic Status: I have reviewed the abo	Meets the free gui	idelines guidelines		- -			
	Meets the free gui Income over the g	idelines guidelines that it is properly an	nd completely	- - filled out to the b	est of my		
Economic Status: I have reviewed the aboknowledge.	Meets the free guing Income over the government and have concluded for district staff):	idelines guidelines that it is properly an	nd completely	- - filled out to the b	est of my		