

#### L'ANSE CREUSE ADULT & ALTERNATIVE EDUCATION PROGRAMS

#### Dear Parent or Guardian:

We are pleased to inform you that Pellerin\_will be participating in the Community Eligibility Provision (CEP) as part of the National School Lunch and School Breakfast Programs for the School Year 2022-2023.

The GREAT NEWS is that ALL students enrolled at our school can receive a healthy breakfast and lunch at NO CHARGE to your household each day.

In place of the Free and Reduced-Price Meal Application we still need your household to **fill out and sign the Household Information Report**. This report is **critical** in determining the amount of money that our school receives from a variety of State and Federal supplemental programs like Title I A, At-risk (31a), Title II A, E-Rate, etc.

These supplemental programs have the potential to offer supports and services for our students including, but not limited to:

- Instructional supports (staff, supplies & materials, etc.)
- Non-instructional services (counseling, social work, health services, etc.)
- Professional Learning for staff
- Parent and Community engagement supplies and activities
- Technology

We are asking that you please complete and submit it September 6, 2022 to ensure that additional funding for our school is available to meet the needs of our students. All information on the report submitted is confidential. Without your assistance in completing and returning the attached report, our school cannot maximize the use of available State and Federal funds.

If we can be of any further assistance, please contact Food and Nutrition at (586) 783-6500.

Sincerely,

Trisha Lewis

NOTICE OF NONDISCRIMINATION: It is the policy of L'Anse Creuse Public Schools not to discriminate on the basis of race, color, religion, national origin or ancestry, gender, age, disability, height, weight or marital status in its programs, services, activities, or employment. Inquiries related to nondiscrimination policies should be directed to: Civil Rights Coordinator, Assistant Superintendent for Personnel, L'Anse Creuse Public Schools Administration Building, 24076 F.V. Pankow Boulevard, Clinton Township, MI 48036, (586) 783-6300. Nondiscrimination inquiries related to disability should be directed to: Section 504 Coordinator, Director for Special Education, (586) 783-6300.

586.783.6420

## **HOUSEHOLD INFORMATION REPORT 2022 - 2023**

#### L'Anse Creuse Public Schools

School: DiAnne M. Pellerin Center

To determine eligibility for various additional state and federal program benefits that your school may qualify for, please complete, sign and return this report to **DiAnne M. Pellerin Center**.

### These sections must be completed by the head of household or designee.

AI DIODEITI IIII	<b>DRMATION</b> – Complete for	i cacii sta	dent Fre-K till o	ugn 12th Grade	
Student's Last Name	Student's First Name	Grade Level	School		Identify H if Homeles M if Migrant R if Runaway F if Foster
If you need additional marked as a <u>Page 2</u> .	lines, attach a second sh	neet to th	is report or a	ttach a copy of	this report clearly
Independence Program (I Bridge Card Numbers and	EIVED - If any member of FIP), or FDPIR, provide the Medicaid Numbers are NO	name and T ACCEPT	l case number i ABLE case num	for the person whobers.	no receives benefits.
Name:			_ Case Number	:	
PART C: SIZE OF FAMIL children →	L <b>Y</b> - Enter the total number	r of individ	luals living in y	our household, in	ncluding all adults and
PART D: TOTAL MONTH Children. If you have repo	ILY HOUSEHOLD INCOMI orted a case number above	E – Report	income for all	members of hous	sehold excluding Fost
Type of Income			ot need to fill i	n this section. Si	
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1. Gross Monthly Earning			ot need to fill i		Circle i
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Do NOT fill out this section. This is for school use only.

Status: F \_\_\_\_\_ R \_\_\_\_ N \_\_\_\_ Determining Official's Signature: \_\_\_\_\_

# INSTRUCTIONS FOR COMPLETING THE HOUSHOLD INFORMATION REPORT

This report is used to determine eligibility for state benefits for which your child(ren)'s school may qualify. Please complete, sign, and return this form to your child's school.

If any member of your household receives benefits from the Food assistance program (FAP), family independence program (FIP), or FDPIR please follow these instructions:

Part A: Student Information - For each student in the household Pre-K through 12th grade, list the last name, first name, grade level, school, and H if homeless, M if Migrant, R if Runaway or F if a Foster Child.

Part B: Benefits Received: If any household member, including adults, receives Food Assistance Program (FAP), Family Independence Program (FIP), or Food Distribution Program on Indian Reservations (FDPIR), provide the name and case number. Bridge Card Numbers and Medicaid Numbers are NOT ACCEPTABLE case numbers.

Part C: Size of Family - Enter the total number of individuals living in your household. This should include all children and adults, related and un-related, that live in a single dwelling and share income and expenses.

Part D: Total Monthly Household Income - Skip this part

Part E: Certification - Sign the form. Print your name and Date.

If your household <u>does not</u> receive benefits from the Food assistance program (FAP), family independence program (FIP), or FDPIR please follow these instructions:

Part A: Student Information - For each student in the household Pre-K through 12th grade, list the last name, first name, grade level, school, and H if homeless, M if Migrant, R if Runaway or F if a Foster Child.

Part B: Benefits Received: Skip this part.

Part C: Size of Family - Enter the total number of individuals living in your household. This should include all children and adults, related and un-related, that live in a single dwelling and share income and expenses.

Part D: Total Monthly Household Income - Enter monthly income for all household members for each type of income that applies. The amount should be before any deductions for taxes, insurance, medical expenses, child support, etc. If you have no income for a category, circle NONE. Add lines though 1 through 6 and enter the Total Monthly Household Income.

Part E: Certification - Sign the form. Print your name, date, and contact information.