

SOCIOECONOMIC INFORMATION FORM - Free & Reduced Meal Form

Please complete this form for **Lowery Freshman Center or Allen High School student**

TEA state regulations requires Allen ISD to have the following form for AHS or LFC students applying for Free or Reduced meals.

(Please complete for your AHS or LFC student even if you listed them on an Free & Reduced Price Lunch Application.)

AHS or LFC students cannot qualify for Free or Reduced price meals without completing this form.

*** CONFIDENTIAL ***

Allen ISD is required to collect the socioeconomic status of each student as a performance indicator for student achievement (TEC 39 for Texas state requirements and ESEA sections 1111 and 1116 for U.S. Department of Education requirements) and for use in disbursement of federal funds (ESEA section 1113).

It is very important that families complete this socioeconomic form in order for schools to receive Title I and State Compensatory Education funding. This funding will directly benefit your child's school. Title I and State Compensatory Education funding can be used to hire personnel, provide tutoring services, order technology, and provide professional development for teachers. We want to continue to provide these necessary learning supports, but without your assistance, we may not be able to.

SECTION A—List only AHS or LFC students in the household (please PRINT)

Student ID	First Name	Last Name	MI	Date of Birth	School Name (circle)	Grade Level
					AHS LFC	
					AHS LFC	
					AHS LFC	
					AHS LFC	
					AHS LFC	

SECTION B

Do you receive Supplemental Nutrition Assistance (SNAP)? YES NO

Do you receive Temporary Assistance to Needy Families (TANF)? YES NO

If you answered YES on either of the above, skip SECTION C and continue to SECTION D.

SECTION C (Complete only if all answers in SECTION B are NO)

How many total members are in the household (include ALL adults and children)? _____

TOTAL YEARLY INCOME BEFORE DEDUCTIONS OF **ALL** HOUSEHOLD MEMBERS: _____

Include wages, salary, welfare payments, child support, alimony, pensions, Social Security, worker's compensation, unemployment and all other sources of income (**before any type of deductions**)

SECTION D (Check one of the following two boxes as appropriate and sign below.)

In accordance with the provisions of the Protection of Pupil Rights Amendment (PPRA) no student shall be required, as part of any program funded in whole or in part by the U.S. Department of Education, to submit to a survey, analysis, or evaluation that reveals information concerning income (other than that required by law to determine eligibility for participation in a program or for receiving financial assistance under such program), without the prior written consent of the adult student, parent or legal guardian.

- I certify that all the information on this form is true. I understand the school will receive federal funds and will be rated for accountability based on the information I provide.
- I choose not to provide this information. I understand that the school's disbursement of federal funds and accountability rating may be affected by my choice.

Parent/Guardian Name (Print)

Parent/Guardian Signature

Date

Please submit your completed form to:

Allen ISD Student Nutrition Department via email, studentnutrition.services@allenisd.org, fax, 214-383-7498 or in person at the Allen ISD Service Center, 1451 N Watters Rd, Allen, TX