[insert letterhead]

WE HAVE CHECKED YOUR APPLICATION

School: ***[insert name of school]***

Date: ***[Insert date]***

Dear ***[insert name]***:

We checked the information you sent us to prove that **[insert name(s) of child(ren)]** are eligible for free or reduced-price meals under federal guidelines and:

☐ You will continue to receive school meals at no charge.
- ☐ You qualify for free school meals under federal guidelines.
- ☐ You qualify for reduced-price school meals under federal guidelines and state funds will pay for the reduced price of meals.

☐ Starting **[insert date]**, **your child(ren) is/are no longer eligible** for free or reduced-price meals for the following reason(s):
- ☐ Records do not show that any household member received benefits from the Supplemental Nutrition Assistance Program (SNAP), Minnesota Family Investment Program (MFIP) or Food Distribution Program on Indian Reservations (FDPIR).
- ☐ Your income is over the limit for free or reduced-price meals.
- ☐ You did not provide: ***[insert reason]***
- ☐ You did not respond to our request.

Meals cost **[insert dollar amount]** for lunch and **[insert dollar amount]** for breakfast. If your household income goes down or your household size goes up, you may apply again. If you were previously denied benefits because no one in the household received SNAP, MFIP or FDPIR benefits, you may reapply based on income eligibility. If you did not provide proof of current eligibility, you will be asked to do so if you reapply.

If you disagree with this decision, you may discuss it with ***[insert name]*** at ***[insert place]***. You also have the right to a fair hearing. If you request a hearing by ***[insert date]***, your child(ren) will continue to receive free meals until the decision of the hearing official is made. You may request a hearing by calling or writing to: ***[insert name and contact information]***.

Kindergarten students: If your household has a kindergarten student who participates in a school breakfast program, the kindergarten student will continue to receive breakfasts at no charge. State funds pay for breakfasts for kindergarten students.

Sincerely,

[signature]

Nondiscrimination statement: This explains what to do if you believe you have been treated unfairly.

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Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish).

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