



Administrative Offices – 416 Arthur Street – Ashland, Ohio 44805 – 419 289 1117 – Fax 419 289 9534

Dear Parents and Legal Guardian of an AHS Student:

Please review the following information below pertaining to the Ashland High School meal assistance program.

Beginning this school year, Ashland High School will pilot a new program to replace the National School Lunch Program (NSLP). This will allow us to provide a greater variety of meals, ala carte items, and beverage options to better meet the student needs.

This new program will continue to provide free or reduced breakfast and lunch for those that meet the financial guidelines. However, you will be required to complete a separate application. This high school application is separate from the K-8 NSLP application.

Note: If you receive a letter from us stating that your student(s) has been directly certified for free meals, you will not need to fill out this separate high school application. You will, however, need to complete the “Waiver of School Instructional Fees – Ashland High School Only” form if you want the current year fees waived for your high school student.

You are responsible for paying for all breakfast and lunch meals for your student until notification on your 2015-2016 application is received from the ACS Food Service Office. Please allow 5-7 days (after application is received in our office) for processing and mail notification.

Exception to Above: If a student received free or reduced meals during the last school year, that student remains free or reduced until October 19, 2015. If a new application for this school year is not processed by October 19th, the student will go to full pay effective October 20, 2015. Please allow 5-7 days (after application is received in food service office) for processing and mail notification.

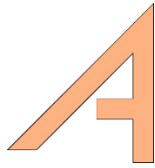
** If you have any questions, please call the Food Service Department between the hours of 6:30am – 4:00pm at (419) 289-1117 ext. 2247. Or you can email any questions or concerns you may have to krward@ashlandcityschools.org.

Thank you for your cooperation in this important matter.

Kristie Ward

Ashland City Schools

Food Service Supervisor



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Instructions for completing the Application for Meal Assistance for High School

Part 1.

Please list **ALL** members living within your household (if a student, including K-8, please complete with the school and grade). Indicate if income is received or not for each member listed.

Part 2.

If any member of your household receives Ohio Works First (OWF) or Supplemental Nutrition Assistance Program (SNAP) benefits, please provide the name of the person who receives the benefit followed by the ten (10) digit case number.

Part 3.

Please list any member of your household who receives income in the appropriate column. All income must be reported as GROSS INCOME (before any deductions) and the frequency it is received. **Proof of each income listed (dated no earlier than 30 days prior to application date) must accompany the application. Provide a copy if possible as it will not be returned to you.**

Part 4.

If your AHS student(s) qualifies for Free meals, they also qualify for a waiver of school instructional fees. We must have your permission to share your Free status with school officials if fees are to be waived. Please check the “Yes” box if you agree to share this information.

Part 5.

The application must be signed by the parent or legal guardian living in the household. The person signing the application understands that all information submitted on this document is true and accurate, and that the school official may verify all reported information. Any deliberate misrepresentation of the information may cause your child(ren) to lose meal benefits.

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