

**REDMOND SCHOOL DISTRICT 2J
SHARING FREE OR REDUCED-PRICE INFORMATION
WITH OTHER PROGRAMS**

Dear Parent/Guardian:

The information you give on the Confidential Application for Free or Reduced Price Meal is only used to determine your student(s) eligibility for Free or Reduced Price meals. **The information may also be used to determine your student(s) eligibility to receive benefits for other programs. To receive those benefits we must have your permission to share your information.**

Sending in this form will not change whether your student(s) get free or reduced meals.

Signing this waiver is NOT A REQUIREMENT for participation in any school nutrition program.

No! I DO NOT want information from my Free and Reduced Price School Meals Application shared with any other programs at Redmond High School.

If you checked "No", stop here. You do not have to complete this form. Your information will not be shared. You will not be eligible for the financial scholarship and will be required to pay the appropriate fee.

Yes! I DO want school officials to share information from my Free and Reduced Price School Meals Application with Redmond High School.

If you marked the program listed above, fill out the form below. I understand that I am releasing information (student's name, F/R status, and/or contact information) to only Redmond High School. I certify that I am the parent/legal guardian of the child(ren) for whom application is being made.

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Address: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

USDA and the State of Oregon are equal opportunity providers and employers.
