



## See Every Bite

Contact Info: (Note: For security purposes, you may be asked to verify your contact info, including your security answer, when you request help.)

Phone: 855.PAY-2-EAT - (855) 729-2328

## Family Hub

Email: [customercare@schoolcafe.com](mailto:customercare@schoolcafe.com)

Website: <https://www.family.schoolcafe.com>

- Click **Apply** for the Free & Reduced Meals application.
- Select from various languages.

Welcome, [User Name]

Apply for Free or Reduced Benefits

Contact

Select Language

English

Español

Use of Information Statement | Non-Discrimination Statement

- The **Household Letter** contains eligibility & meal pricing information.
- You can click to Download or to proceed click **Next**.

Household Letter

This letter, provided by your district, lists all of the rules, expectations, and other important information you will need while filling out your application.

**2022-2023 FREE & REDUCED-PRICE SCHOOL MEAL APPLICATION**

**SCHOOL MEALS FAQ**

Children need healthy meals to learn. Columbia Public Schools' Nutrition Services offers healthy meals every school day. Your children may qualify for additional benefits by completing a current free and reduced-price application. This packet includes an application for free or reduced-price meal benefits, and a set of detailed instructions. Below are some common questions and answers to help you with the application process.

**I. WHO CAN GET FREE OR REDUCED-PRICE MEALS?**

All children in households receiving one or more of the following below eligibility criteria:

- Household gross income meets 135-185% or less of the federal poverty level
- Food Stamp Program/Supplemental Nutrition Assistance Program (SNAP) eligible
- Food Distribution Program on Indian Reservations (FDPIR) eligible
- Temporary Assistance for Needy Families (TANF) eligible
- Foster children: children who are the legal responsibility of a foster care agency or court
- Children participating in a Head Start program
- Homeless, runaway, or migrant children

Your children may qualify for free or reduced-price meals if your household income falls within the limits on the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced-price meals if your household income falls at or below the limits on this chart.

MEAL PRICES	
<b>SCHOLARS GRADES K-5</b>	
• Breakfast:	\$3.00
• Lunch:	\$2.95
• Add'l milk or juice only:	\$0.50 each
<b>SCHOLARS GRADES 6-12</b>	
• Breakfast:	\$2.00
• Lunch:	\$2.15
• Additional milk:	\$0.50 each
<b>REDUCED-PRICE K-12</b>	
• Breakfast:	\$0.30
• Lunch:	\$0.40
• Menus are available online:	<a href="http://www.cps12.org/nutrition">www.cps12.org/nutrition</a>

Download Household Letter

Previous Next

- Click to Certify your information is correct.
- If any information needs to be updated, click **Edit**.

Certify

Please provide honest acknowledgement of the terms and conditions for this application.

Parent  
MO  
(855) 729-2328  
RBensonTest@primeroedge.com

I certify (promise) that all information on this application is true and that all information is correct. I understand that if I purposely give false information, my child will be ineligible for benefits. \* required

Previous

- Add students to your application.

Apply for Free or Reduced Benefits

Contact

Students Assistance Household

Students

Enter all K-12 students in this school district.

Add a Student+

You do not have any students associated with your SchoolCafé

Previous

Start Over

Add a Student

Student ID

Student ID

First Name \* required

Last Name \* required

Middle Name

Date of Birth

School

Is this student a Foster, Homeless, Migrant, Runaway, Head Start child? \* required

Yes No

Does this student receive income? \* required

Yes No

Cancel Add this Student

- Students already added to your SchoolCafe account will populate and can be selected here.

✓ Apply for Free or Reduced Benefits

Contact

Select students from your SchoolCafé account

Please select any students you have already added to your account and answer a few basic

- Charles
- James
- James

- Add information about the Financial Assistance you receive in the Assistance step.

Students Assistance Household Review

★ Assistance

Do you receive any assistance from SNAP, TANF, or FDIPIR?

Yes  No

**Benefits Received** \* required

What type of benefits do you receive?

FDIPIR  FS/TANF Case Number  SNAP  TANF

Previous

- Enter information such as **Case Number**.
- Number of Digits is validated to ensure accuracy.

What is your case number?

Case Number

0123456789

What is your case number?

Case Number

123456789

The number is not in correct format

- Add additional Household members & adjust income if needed by clicking the Pencil icon.

Students Assistance Household Review Submit

Household

Please list all other household members (children, dependents, and adults that are not enrolled in this district), and any income they may receive, so that we can determine your household size/income.

Add Household Member

Parent, (applicant)  
Income: None

Students

James  
Elementary, Grade: 05  
Date of Birth: 01/05/2012  
Income: None  
Foster/Homeless/Migrant/Runaway/Head Start: No

- Review your application information.
- Click Go Back to return to previous steps to adjust any information.

Students Assistance Household Review Submit

Review

Glance over your information and make sure everything looks good. If something needs to be changed you can select the edit option for each section. Otherwise, you can proceed to the next step.

Students

You have indicated that your household contains 3 K-12 student(s) enrolled in this district:

James  
Elementary, Grade: 05  
Date of Birth: 01/05/2012  
Income: None  
Foster/Homeless/Migrant/Runaway/Head Start: No

Go Back to Students

- Enter the last 4 digits of your SSN (if required).
- Digitally sign your Online Application.
- Submit your application.

Students Assistance Household Review **Submit**

**Submit**

Parent

Before submitting, please fill in a few details about yourself. This information will not be shared but helps the food service office contact you with the results of your application. An adult household member must electronically sign the application. If the household member inform section is completed, the adult signing this application should have a social security number or mark the 'I do not have a SSN' box. Law requires us to capture the last 4 digits of your social security number for applying. If you do not have a social security number you may indicate that below.

Do you have an SSN?  
 Yes  No

Enter the last 4 digit of your Social Security Number  
 1234

Columbia Parent

Your application was successfully verified and signed via IP Address 10.21.0.5.

[Go Back to Review](#) [Submit My Application](#)

- After submitting, you will receive an application copy.
- Print or download a copy of your application.

Application Number #245

2022 - 2023 Application for Free and Reduced Price Meal Application #:245

**STEP 1 - All Children in the Household** Children in Foster Care and children who meet the definition of Homeless, Migrant or Runaway are eligible for free meals. Read How to Apply For Free and Reduced Price School Meals for more information.

Student ID	Last Name	First Name	MI	DOB	School Code	Grade	Direct Approval
						09	
						12	

Definition of Household Member: Anyone who is living with you and shares income and expenses, even if not related.

**STEP 2 - Assistance Programs**

Do any household members (including you) currently participate in FSAP? **Add Case # / EDG # or SNAP Identifier (not the EBT #):**  
 If you answered NO > Complete STEP 3. If you answered YES > -- / --  
 Write a case number / EDG number then skip to STEP 4. Write only one case # / EDG # in the space above.

**STEP 3 - All Household Member Income (Skip this step if you answered 'Yes' in STEP 2)**

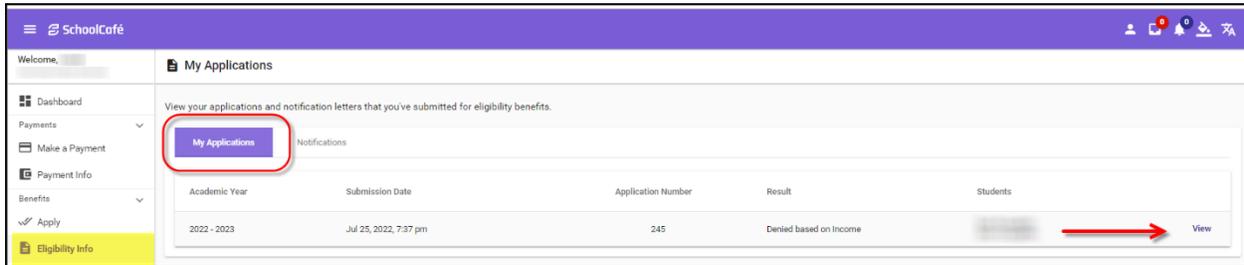
Please read How to Apply for Free and Reduced Price School Meals for more information. The 'Sources of Income for Children' section will help you with the Child Income question. The 'Sources of Income for Adult' section will help you with All Adult Household Members section.

Gross income and how often it is received.		Child Income	How Often?			
A. Sometimes children in the household earn or receive income. Please include the TOTAL income received by all household members listed in Step 1 here.		\$0.00	Annually			
B. List all household members not listed in Step 1 (including yourself) even if they do not receive income. For each household member listed, report total income for each source in whole dollars only. If they do not receive income from any source, write '0'. If you write '0' or leave any field blank, you are certifying (promising) that there is no income to report.						
Household Member (First and Last Name)	Earnings from Work	How Often?	Public Assistance / Child Support / Alimony	How Often?	Pensions / Retirement / All Other Income	How Often?
		Annually				

Last Four Digits of Social Security Number (SSN)

[Print](#) [Download](#) [Close](#)

- To view previous applications and their status, go to **Eligibility Info** and click on the **My Application** tab.



- To view Notification letters, go to **Eligibility Info** and click on the **Notifications** tab.

