

Dear Parent, Guardian:

Please find Attached, the Laurel Springs Lunch Menu, Free and Reduced Form, Breakfast and Lunch order information for the month of September. Breakfast and lunch are FREE to all students at this time. Breakfast and Lunch will be served in the classrooms to all students who **PREORDER** their meals. If you are interested in receiving the free meals, please fill out the forms attached and email me the information for the September 8, 9, and 10. For the rest of the month you can send the forms back in with your child. The Breakfast is a Kellogg Complete Meal which includes Milk. I still need the free and reduced forms completed by each family in case of change during the school year.

Thank you

Sharon Isard

856-783-1086 Ext 114

sisard@laurelspringschool.org

SEPTEMBER

Elem. Lunch Menu

Laurel Springs School
District

DAILY ALTERNATES:
Peanutbutter Uncrustable

Choose 1 Entrée. Daily
Lunch Includes: Protein ~
Grain ~Fruit~ Veggie ~Milk

Your student will receive
Entrée, Daily Fruit and
Vegetable and choice of Milk

CAFÉ CONTACT INFO:

Food Service Director: First And Last Name
abc@nsfm.com

Phone: 856-784-4441 ext 1160

Milk: Skim White, Skim Chocolate, Lactaid.

*Menu subject to change

This institution is an equal opportunity provider.

Wednesday-September 1

**Due to Current Food Shortages
Our Menus This Year
are Subject to Change.**

Thursday-September 2



Friday-September 3

FREE SCHOOL MEALS

Breakfast & Lunch will be
FREE for all students for
the 2021-2022 School Year

Monday-September 6

*Happy
Labor
Day*

Tuesday-September 7



Wednesday-September 8

Italian Hoagie
Peanutbutter and Jelly Sandwich
Sides:
Veggie of the Day
Fresh or Cupped Fruit

Thursday-September 9

Ham and Cheese
On Kaiser Roll
Three Cheese Sandwich
Sides:
Veggie of the Day
100% Fruit Juice

Friday-September 10

Peperoni and Cheese
Roll
Turkey and Cheese Wrap
Sides:
Veggie of the Day
Fresh or Cupped Fruit

Monday-September 13

Bagel Boat
(Bagel Yogurt & Cheese Stix)
American Hoagie
Sides:
Veggie of the Day
Fresh or Cupped Fruit

Tuesday-September 14

Turkey and
On a Kaiser
Chicken Salad Sandwich
Sides:
Veggie of the Day
100% Fruit Juice

Wednesday-September 15

Ham and Cheese
Wrap
Tunafish Salad Sandwich
Sides:
Veggie of the Day
Fresh or Cupped Fruit

Thursday-September 16

Three Cheese
Sandwich
Asian Crispy Chicken Wrap
Sides:
Veggie of the Day
100% Fruit Juice

Friday-September 17

Pepperoni and
Cheese Wrap
Turkey Club Sandwich
Sides:
Veggie of the Day
Fresh or Cupped Fruit

Monday-September 20

Bagel Boat
(Bagel Yogurt Cheese Stix.)
American Hoagie
Sides:
Veggie of the Day.
Fresh or Cupped Fruit

Tuesday-September 21

BBQ Crispy Chicken
Three Cheese sandwich
Sides:
Veggie of the Day
100% Fruit Juice

Wednesday September 22

Chicken Salad
Sandwich
Turkey and Cheese on Kaiser
Sides:
Veggie of the Day
Fresh or Cupped Fruit

Thursday-September 23

Chicken Caesar Wrap
Ham and Cheese Wrap
Sides:
Veggie of the Day
100% Fruit Juice

Friday-September 24

Tunafish Salad
Om Roll
Peperoni and Cheese Wrap
Sides:
Veggie of the Day
Fresh or Cupped Fruit

Monday-September 27

Bagel Boat
(Bagel Yogurt Cheese Stix)
American Hoagie
Sides:
Veggie for the Day
Fresh or Cupped Fruit

Tuesday-September 28

Chicken Caesar Wrap
Turkey and Cheese Sandwich
Sides:
Veggie of the Day
100% Fruit Juice

Wednesday-September 29

Ham & Cheese on
Kaiser
Chickensalad on Roll
Sides:
Veggie of the Day
Fresh or Cupped Fruit

Thursday-September 30

Chicken Ranch Wrap
Ona Bun
Turkey Club Sandwich
Sides:
Veggie of the Day
100% Fruit Juice

**Meals are FULLY
FUNDED by the
USDA through
June 30, 2022!!!**

Please call the 783-1086 X114 to cancel.

LAUREL SPRINGS SCHOOL
LUNCH MENU

September 8th -10



MONDAY: #1 No School
#2

TUESDAY: #1 No Lunch Served – Half Day
#2

WEDNESDAY: #1 Italian Hoagie
#2 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fresh or Cupped Fruit

THURSDAY: #1 Ham & Cheese on Kaiser Roll
#2 Three Cheese Sandwich
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fruit Juice

FRIDAY: #1 Peperoni and Cheese Roll
#2 Turkey and Cheese Wrap
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fresh or Cupped Fruit

Please Note:

1 day =
2 days =
3 days =
4 days =
5 days =

LUNCH ORDER FORM September 8-10

Lunch will be available on a daily basis but must be ordered a week in advance.

CHILD'S NAME _____ GRADE _____

Breakfast ~~1~~ ~~2~~ ~~3~~ W TH F (circle day)

~~MONDAY~~

~~1 2 3~~

~~TUESDAY~~

~~1 2 3~~

WEDNESDAY

1 2 3

THURSDAY

1 2 3

FRIDAY

1 2 3

Order Form for the first week please email sisard@laurelspringschool.org on or before Tuesday Sept 7th.

Please call the 783-1086 X114 to cancel.

LAUREL SPRINGS SCHOOL
LUNCH MENU

September 13th – 17th



MONDAY: #1 Bagel Boat
#2 American Hoagie
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fresh or Cupped Fruit

TUESDAY: #1 Turkey on a Kaiser Roll
#2 Chicken Salad Sandwich
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fruit Juice

WEDNESDAY: #1 Ham & Cheese Wrap
#2 Tuna fish Salad Sandwich
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fresh or Cupped Fruit

THURSDAY: #1 Three Cheese Sandwich
#2 Asian Crispy Chicken Wrap
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fruit Juice

FRIDAY: #1 Peperoni and Cheese Wrap
#2 Turkey Club Sandwich
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fresh or Cupped Fruit

Please Note:

1 day =
2 days =
3 days =
4 days =
5 days =

LUNCH ORDER FORM September 13-17

Lunch will be available on a daily basis but must be ordered a week in advance.

CHILD'S NAME _____ GRADE _____

Breakfast M T W TH F (circle day)

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

1 2 3

1 2 3

1 2 3

1 2 3

1 2 3

Order Form due on Wednesday September 8th for the full month.

Please call the 783-1086 X114 to cancel.

LAUREL SPRINGS SCHOOL
LUNCH MENU

September 20th – 24th



MONDAY: #1 Bagel Boat
#2 American Hoagie
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fresh or Cupped Fruit

TUESDAY: #1 BBQ Crispy Chicken
#2 Three Cheese Sandwich
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fruit Juice

WEDNESDAY: #1 Chicken Salad Sandwich
#2 Turkey and Cheese on a Kaiser
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fresh or Cupped Fruit

THURSDAY: #1 Chicken Caesar Wrap
#2 Ham and Cheese Wrap
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fruit Juice

FRIDAY: #1 Tuna Fish Salad on a Roll
#2 Peperoni & Cheese Wrap
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fresh or Cupped Fruit

Please Note:

1 day =
2 days =
3 days =
4 days =
5 days =

LUNCH ORDER FORM September 20-24

Lunch will be available on a daily basis but must be ordered a week in advance.

CHILD'S NAME _____ GRADE _____

Breakfast M T W TH F (circle day)

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

1 2 3

1 2 3

1 2 3

1 2 3

1 2 3

Order Form due on Wednesday September 8th for the full month.

Please call the 783-1086 X114 to cancel.

LAUREL SPRINGS SCHOOL
LUNCH MENU

September 27th -30th



MONDAY: #1 Bagel Boat
#2 American Hoagie
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fresh or Cupped Fruit

TUESDAY: #1 Chicken Caesar Wrap
#2 Turkey & Cheese Sandwich
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fruit Juice

WEDNESDAY: #1 Ham and Cheese on a Kaiser
#2 Chicken Salad on a Roll
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fresh or Cupped Fruit

THURSDAY: #1 Chicken Ranch Wrap
#2 Turkey Club Sandwich
#3 Peanut Butter & Jelly Uncrustable
Milk, Veggie of the Day, Fruit Juice

FRIDAY: #1
#2
#3

Please Note:

1 day =
2 days =
3 days =
4 days =
5 days =

LUNCH ORDER FORM September 27-30

Lunch will be available on a daily basis but must be ordered a week in advance.

CHILD'S NAME _____ GRADE _____

Breakfast M T W TH **X**(circle day)

MONDAY

1 2 3

TUESDAY

1 2 3

WEDNESDAY

1 2 3

THURSDAY

1 2 3

~~FRIDAY~~

~~1 2 3~~

Order Form due on Wednesday September 8th for the full month.

Dear Parent/Guardian:

Children need healthy meals to learn. The **LAUREL SPRINGS BD OF ED** offers healthy meals through the **NATIONAL SCHOOL LUNCH PROGRAM, SCHOOL BREAKFAST PROGRAM at NO COST to all children enrolled**. In order for this school to receive all the Federal and State meal/milk reimbursement to which it is entitled, the attached application must be completed, signed and returned to the school as soon as possible. Please complete all the required sections on the form. The school cannot process an application that does not contain the required information.

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.

1. WHO CAN GET FREE OR REDUCED PRICE MEALS?

- All children in households receiving benefits from NJ **SNAP** or NJ **TANF** are eligible for free meals.
- Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals.
- Children participating in their school's Head Start program are eligible for free meals.
- Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
- Children may receive free or reduced price meals if your household's income is 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

FEDERAL INCOME CHART For school Year 2021-2022			
Household Size	Yearly	Monthly	Weekly
1	23,828	1,986	459
2	32, 227	2,686	620
3	40,626	3,386	782
4	49, 025	4,086	943
5	57,424	4,786	1,105
6	65,823	5,486	1,266
7	74,222	6,186	1,428
8	82,621	6,886	1,589
For each additional person, add:	+8,399	+700	+162

- HOW DO I KNOW IF MY CHILDREN QUALIFY AS HOMELESS, MIGRANT, OR RUNAWAY? Do the members of your household lack a permanent address? Are you staying together in a shelter, hotel, or other temporary housing arrangement? Does your family relocate on a seasonal basis? Are any children living with you who have chosen to leave their prior family or household? If you believe children in your household meet these descriptions and haven't been told your children will get free meals, please call or e-mail your school, homeless liaison or migrant coordinator.
- DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD? No. *Use one Free and Reduced Price School Meals Application for all students in your household.* We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to one of your children's schools.
- SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE MEALS? No, but please read the letter you got carefully and follow the instructions. If any children in your household were missing from your eligibility notification, contact your school immediately.
- CAN I APPLY ONLINE? If available, you are encouraged to complete an online application instead of a paper application. The online application has the same requirements and will ask you for the same information as the paper application. Contact your school if you have any questions about the online application.
- MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT A NEW ONE? Yes. Your child's application is only good for that school year and for the first few days of this school year. You must send in a new application unless the school told you that your child is eligible for the new school year.
- I GET WIC. CAN MY CHILDREN GET FREE MEALS? Children in households participating in WIC may be eligible for free or reduced price meals. Please send in an application.
- WILL THE INFORMATION I GIVE BE CHECKED? Yes. We may also ask you to send written proof of the household income you report.
- IF I DON'T QUALIFY NOW, MAY I APPLY LATER? Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and reduced price meals if the household income drops below the income limit.
- WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION? You should talk to school officials. You also may ask for a hearing by calling or writing to:

Hearing Officer Name: Ryan Mahlman Address: 500 W. Stafford Avenue
Phone Number: (571)241-9470 Ext: 111

11. MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN? Yes. You, your children, or other household members do not have to be U.S. citizens to apply for free or reduced price meals.
12. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you normally receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
13. WHAT IF SOME HOUSEHOLD MEMBERS HAVE NO INCOME TO REPORT? Household members may not receive some types of income we ask you to report on the application, or may not receive income at all. Whenever this happens, please write a 0 in the field. However, if any income fields are left empty or blank, those will also be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you meant to do so.
14. WE ARE IN THE MILITARY. DO WE REPORT OUR INCOME DIFFERENTLY? Your basic pay and cash bonuses must be reported as income. If you get any cash value allowances for off-base housing, food, or clothing, or receive Family Subsistence Supplemental Allowance payments, it must also be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. Any additional combat pay resulting from deployment is also excluded from income.
15. WHAT IF THERE ISN'T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY? List any additional household members on a separate piece of paper, and attach it to your application.
16. MY FAMILY NEEDS HELP. ARE THERE ANY PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for NJ SNAP or other assistance benefits, contact your local assistance office, call 1-800-687-9512 or go to <https://oneapp.dhs.state.nj.us/default.aspx>. You can also contact NJ FamilyCare or Medicaid at 1-800-701-0710 or www.njfamilycare.org for information regarding health insurance for your family. For the WIC Program, call 1-800-328-3838 or go to www.nj.gov/health/fhs/wic.

If you have other questions or need help,
call (856)783-1086 Ext:114

Sincerely,

Signature: _____

Name: Sharon Isard

Title: Lunch Coordinator

Application #:

2021-2022 Application for Free and Reduced Price School Meals

Complete one application per household. Please type or use a pen (not a pencil).

Available online at:

STEP 1 List ALL Household Members who are infants, children, and students up to and including Grade 12 (if more spaces are required for additional names, attach another sheet of paper)

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

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.

Child's First Name

MI

Child's Last Name

[press spacebar to advance]

School Name (Abbr.)

Student attends this school district?

Yes No

Check all that apply

Foster Child

Migrant Worker, Homeless, Runaway

STEP 2 Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF, or FDPIR?

YES

NO

If you answered NO > Complete STEP 3.

If you answered YES > Write a case number here then go to STEP 4 (Do not complete STEP 3)

Case Number:

Write only one case number in this space.

STEP 3 Report Income for ALL Household Members (Skip this step if you answered 'Yes' to STEP 2)

A. Child Income

Sometimes children in the household earn or receive income. Please include the TOTAL income received by all Household Members listed in STEP 1 here.

Child income	How often?
	Weekly Bi-Weekly 2x Month Monthly
\$	

B. All Adult Household Members (including yourself)

List all Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they do not receive income, report total gross income (before taxes) for each source in whole dollars (no cents) only. If they do not receive income from any source, write '0'. If you enter '0' or leave any fields blank, you are certifying (promising) that there is no income to report.

Name of Adult Household Members (First and Last)	Earnings from Work	How often?	Public Assistance/Child Support/Alimony	How often?	Pensions/Retirement/All Other Income	How often?
		Weekly Bi-Weekly 2x Month Monthly		Weekly Bi-Weekly 2x Month Monthly		Weekly Bi-Weekly 2x Month Monthly
	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	
	\$		\$		\$	

Total Household Members (Children and Adults)

Last Four Digits of Social Security Number (SSN) of Primary Wage Earner or Other Adult Household Member

Check if no SSN

STEP 4 Contact information and adult signature. Mail Completed Form To:

"I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and that school officials may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws."

Street Address (if available)

Apt #

City

State

Zip

Daytime Phone and Email (optional)

Printed name of adult signing the form

Signature of adult

Today's date

INSTRUCTIONS Sources of Income

Sources of Income for Children	
Sources of Child Income	Example(s)
- Earnings from work	- A child has a regular full or part-time job where they earn a salary or wages
- Social Security <ul style="list-style-type: none">- Disability Payments- Survivor's Benefits	- A child is blind or disabled and receives Social Security benefits - A Parent is disabled, retired, or deceased, and their child receives Social Security benefits
-Income from person outside the household	- A friend or extended family member regularly gives a child spending money
-Income from any other source	- A child receives regular income from a private pension fund, annuity, or trust

Sources of Income for Adults		
Earnings from Work	Public Assistance / Alimony / Child Support	Pensions / Retirement / All Other Income
- Salary, wages, cash bonuses - Net income from self-employment (farm or business) If you are in the U.S. Military: - Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances) - Allowances for off-base housing, food and clothing	- Unemployment benefits - Worker's compensation - Supplemental Security Income (SSI) - Cash assistance from State or local government - Alimony payments - Child support payments - Veteran's benefits - Strike benefits	- Social Security (including railroad retirement and black lung benefits) - Private pensions or disability benefits - Regular income from trusts or estates - Annuities - Investment income - Earned interest - Rental income - Regular cash payments from outside household

OPTIONAL Children's Racial and Ethnic Identities

We are required to ask for information about your children's race and ethnicity. This information is important and helps to make sure we are fully serving our community. Responding to this section is optional and does not affect your children's eligibility for free or reduced price meals.

Ethnicity (check one): ☐ Hispanic or Latino ☐ Not Hispanic or Latino ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White ☐

The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

mail civil rights complaints only to: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410
fax: (202) 690-7442; or
email: program.intake@usda.gov
This institution is an equal opportunity provider.

Do not fill out For School Use Only

Annual Income Conversion: Weekly x 52, Every 2 Weeks x 26, Twice a Month x 24, Monthly x 12

Total Income	How often?				Household Size	Categorical Eligibility	Date	Verifying Official's Signature	Date
	Weekly	Bi-Weekly	2x Month	Monthly					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Determining Official's Signature									

Eligibility:

Free	Reduced	Denied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SHARING INFORMATION WITH MEDICAID or NJ FAMILYCARE

Dear Parent/Guardian:

If your children get free or reduced price school meals, they may also be able to get free or low-cost health insurance through Medicaid or NJ FamilyCare. Children with health insurance are more likely to get regular health care and are less likely to miss school because of sickness.

Because health insurance is so important to children's well-being, **the law allows us to tell Medicaid and NJ FamilyCare that your children are eligible for free or reduced price meals, unless you tell us not to.** Medicaid and NJ FamilyCare only use the information to identify children who may be eligible for their programs. Program officials may contact you to offer to enroll your children. Filling out the Free and Reduced Price School Meals Application does not automatically enroll your children in health insurance.

If you do not want us to share your information with Medicaid or NJ FamilyCare, fill out the form below and send in (Sending in this form will not change whether your children get free or reduced price meals).

- ☐ **No! I DO NOT** want information from my Free and Reduced Price School Meals Application shared with Medicaid or the State Children's Health Insurance Program (NJ FamilyCare)

If you checked no, fill out the form below to ensure that your information is NOT shared for the child(ren) listed below:

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____ Address: _____

Return this form to your child's school, **ONLY** if you do NOT wish your information to be shared with Medicaid or NJ FamilyCare.