Guide to Completing the Online Free and Reduced-Price Meal Application

 Open your web browser and go to <u>www.schoolcafe.com/fbisd</u> or follow the link on our home page at <u>www.fortbendisd.com</u>, "Quick Links", "Free and Reduced-Price Lunch Application – Check Your Status".

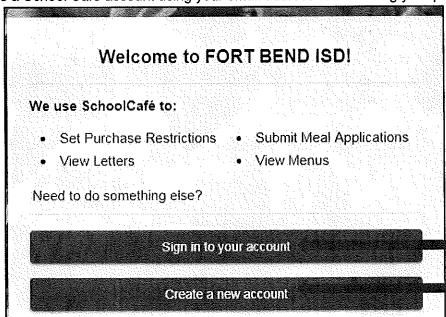


2. Choose your language at top right of screen.





3. "Create a New Account" in School Café if you do not already have one or, "Sign In to Your Account" if you already have a School Café account using your email address and entering your password.



schoolcafe

Create your account here. Choose the correct category.

Register

() I'm a Parent

I want to manage my child's cafeteria account.

() I'm a Student at this District

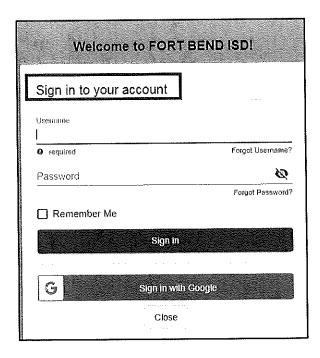
I want to manage my own cafeteria account.

() I'm an Employee of this District

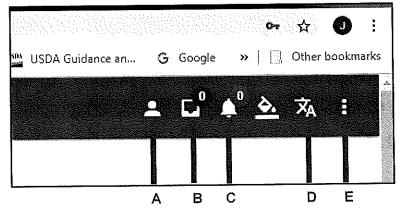
I want to manage my own cafeteria account.

Next

Return to My District



4. Once you sign in, you will see this screen. Please note the different icons at the top of the screen on the right.



A = Your Profile Settings

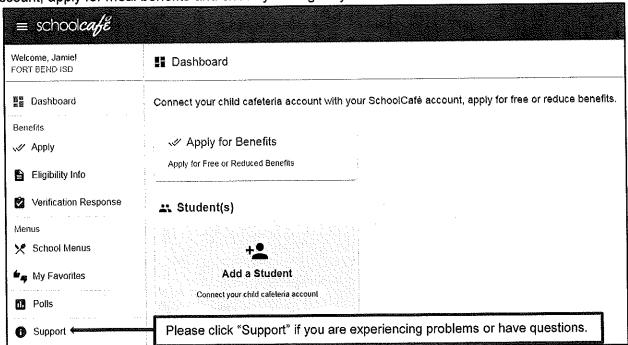
B = School Café Announcements

C = School Café Alerts

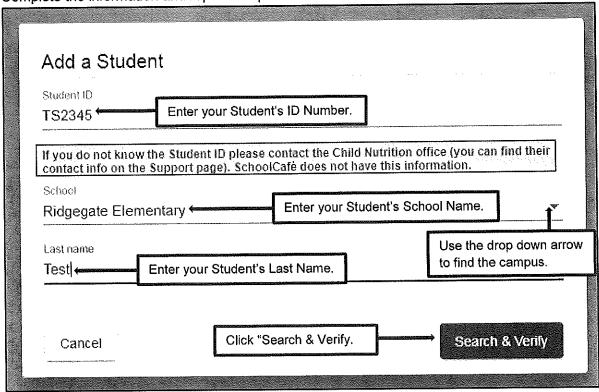
D = Choose a Language - English

E = Log Out

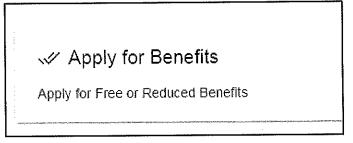
5. You will also see this image on the screen. From here, you can add your FBISD student(s) to your account, apply for meal benefits and check your eligibility information. Click on "Add a Student".



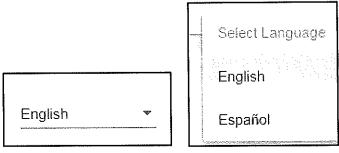
6. Complete the information and repeat the process to add more than one FBISD student to your account.



7. Now you are ready to apply for Free and Reduced-Price Meal Benefits. Click the "Apply for Benefits" box.



8. Choose your language at top right of screen – English or Spanish only. If you need other languages, please contact the Child Nutrition Department <u>with an interpreter</u> for assistance.



9. The Household Letter will appear. If you wish, download this letter by clicking the "Download Household Letter" box however, the letter will always appear when you click the "Apply for Benefits" box anytime you wish to read it. Click "Next" at the bottom of the screen.

FBISD

FREE or REDUCED PRICE MEALS INFORMATION LETTER TO HOUSEHOLD

Business and Finance Child Nutrition Department

Dear Parent/Guardian:

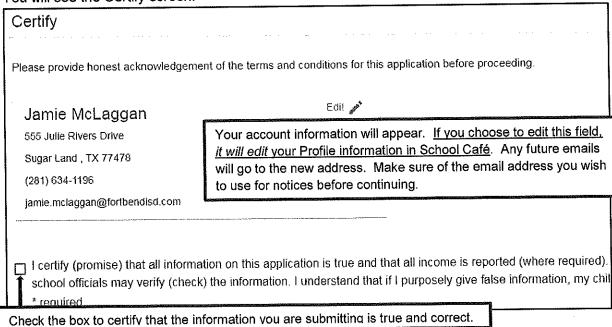
Children need healthy meals to learn, and Fort Bend ISD offers healthy meals every school day. Breakfast costs \$1.25; lunch costs elementary: \$2.25; secondary: \$2.50. Your children may qualify for free meals or for reduced-price meals. Reduced-price is \$0.30 for breakfast and \$0.40 for lunch. If you received a notification letter that a child is directly certified for free or reduced-price meals, do not complete an application. Let the Child Nutrition Department know if any children in the household attending school are not listed in the letter.



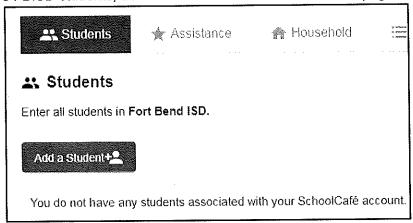
Download Household Letter



10. You will see the Certify screen.



11. If you "Add a Student" at account creation, they will appear on this page. If you need to add a FBISD student or add more FBISD students, use the "Add a Student" button on this page.

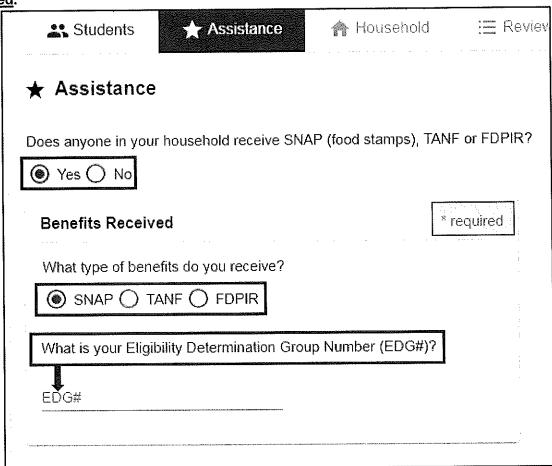


12. Click the "Add a Student" button. Complete all requested information. If it is in RED the information is required. When complete click "Add this Student" at the bottom.

Add a Stu	ıdent							
Student ID	Enter your Student's ID Number if known. It is not required but very helpful when processing your application.							
First Name								
Last Name		* required						
Lastramo		* required						
Middle Nam Date of Birth	birth and school name if known. It is not required but very helpful when processing	in the second se						
School		₩						
Is this stud	ent a Foster, Homeless, Migrant, Runaway, Head Start child?	·						
O Yes C) No	* required						
Does this s	* required							
To ensure that we can match your students, please enter as many details as possible.								
Cancel		i this Studeni						

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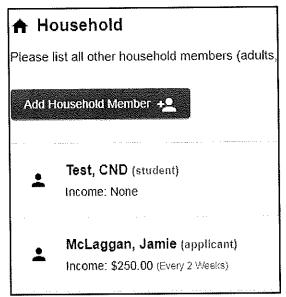
13. Click "Next" and the Assistance page appears. If "Yes", mark the circle and choose the type of assistance. Enter your Eligibility Determination Group Number (EDG#) for your SNAP (food stamps) or TANF (assistance for needy families) benefits issued by the State of Texas only. No other states are accepted.



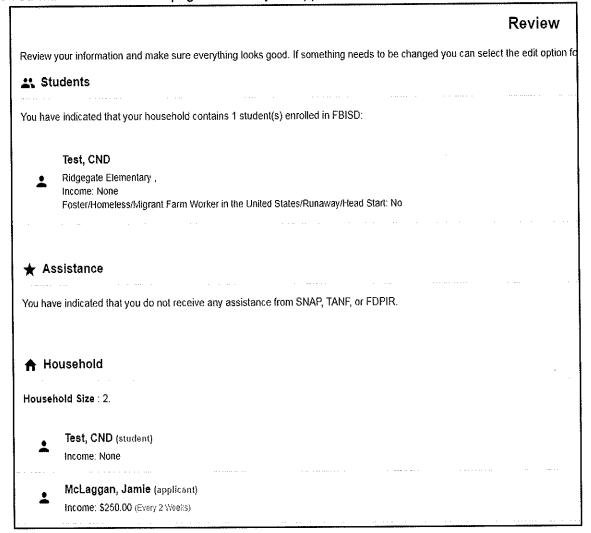
14. If "No", mark that circle and click the "Next" button. Enter the income of the Adult Household Member that is completing the application.

Update Applicant								
Name: Jamie McLaggan	_							
Does this member receive income? (a) Yes \(\c) No								
If this household member receives incom amount and frequency.	ne, please enter the t	GROSS (pre-tax)						
\$ Income (Work)	Frequency	×						
\$ Income (Assistance)	Frequency	<u>*</u> ×						
\$ Income (Other)	Frequency	* _ × :						
Cancel		430 316 1491021						

15. Click "Add this Member". If you need to add more children **not** attending FBISD or more adults in the household, click the "Add Household Member" button and follow the above steps. When complete, click "Next".



16. You will see the "Review" page. Review your application information for correctness.

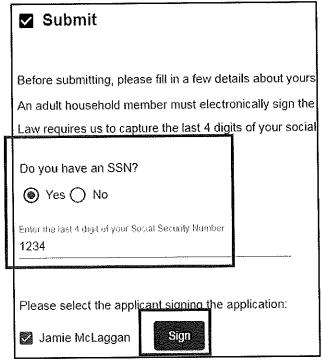


Go Back to Students Go Back to Assistance Go Back to Household 18. If the information is correct, click the "Next" button. You will see this screen. Click "Next". **Optional Info** (You do not have to complete this part to receive free or reduced priced meals.) **Ethnicity** Hispanic or Latino Not Hispanic or Latino Racial Identity Asian American Indian or Alaskan Native Black or African American Mative Hawaiian or Other Pacific Islander ☐ White Consent to Release Meal Eligibility At this time, no optional programs exist that might request your information, so you can ignore this section. Information Sharing By checking this box, you voluntarily consent to let your child(ren)'s school share your child(ren)'s meal eligibil

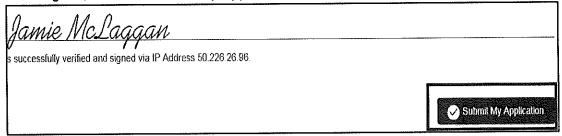
17. If you need to make changes, use the "Go Back..." links on the right of your screen.

listed.

19. You will see the "Submit" screen – complete the "Do you have an SSN?" – Social Security Number. Answer "Yes" or "No". If yes, enter the last four digits of your number. Then check the box next to the correct Adult Household Member completing the application and click "Sign".



20. Once signed, click the "Submit My Application" button on the bottom right.



21. You can print or save your application however, it will always be available to you in School Café.

Summary	Once your application is complete, you will receive an immediate response on this page.									
You have successfully completed your online application!			en e manero monte especiales		and many positive			a managaran		
	2019 - 2020 App	lication for Free an	d Reduced Price Me	eal • C	omplete on	e application	rer househol	d. Apr	ofication #: 8	
	TET 1-All Cillo	I I III OJE NODSEKOM	Children in Fester Care free meals Read How to	Apply F	or Free and	Reduced Pric	School Mea	is for more s		
	Oi Inebut?	Last Name	First Name	M)	800	Student?	Code	Grade	Direct Approval	
		Test	CND			ii	116			
	Definition of Household Elember. "Anjoine who is loving with you and shares income and expenses, even if not related."									
	STEP 2 - Assista	nce Programs								
	Do any household mambers (including you) currently participate in STIAP? If you answered ND> Complete STEP 3.If you answered YES >						(not the EBT #):			

- 22. If there is more information needed, the Child Nutrition Department will complete the information or call you for assistance.
- 23. Once the application is processed, you will receive an email notification letter. Your letter is also available in your School Café account for your convenience. If your email fails, we will mail you a printed letter.
- 24. Please contact us at 281-635-1855 if you need assistance.