Dear Parent/Guardian:

**[Insert name of school/school district]** offers choice of low-fat and nonfat milk each school day. Students may buy milk for $ **[insert price**]. Students who qualify under the U.S. Department of Agriculture (USDA) guidelines may get milk at no cost. For more information, please call the school at **[insert telephone number]**. This packet includes an application for free milk benefits and detailed instructions.

**NOTE:** Children receiving Supplemental Nutrition Assistance Program (SNAP), Temporary Family Assistance (TFA) or Medicaid (HUSKY A) benefits *may* be directly certified and automatically eligible for free milk without applying for benefits. Questions regarding SNAP/TFA/Medicaid and direct certification should be sent to the determining official **[insert name and telephone number]**.

If you have received a NOTICE OF DIRECT CERTIFICATION for free milk, **do not** complete the application unless instructed to do so by the district. Let the school know if any children in your household are **not**listed on the **Notice of Direct Certification** letter you received since free milk benefits are extended to all students in a household when directly certified.

Additionally, all school-aged students in income-eligible households can receive school milk benefits regardless of their immigration status and the district/school does not release information for immigration-related purposes in the usual course of operating the USDA Child Nutrition Programs.

The **[insert name of school/school district]** complies with the federal requirements for milk modifications for students with special dietary needs. The requirements for milk modifications are different for students with and without disabilities. For more information, please contact the food service director, [**insert name]** at **[insert telephone number**].

The answers to the common questions below can help you with the application process.

1. **Who can get free milk**?
	* All students in households receiving SNAP or TFA benefits are eligible for free milk. Note: *Some* students receiving Medicaid (HUSKY A) benefits are eligible for free milk.
	* Foster children that are under the legal responsibility of a foster care agency or court are eligible for free milk. (Note: A foster child is categorically eligible for free milk and may be included as a member of the foster family if the foster family chooses to also apply for benefits for other children. Including children in foster care as household members may help other students in the household qualify for benefits. If non-foster children in a foster family are not eligible for free milk benefits, an eligible foster child will still receive free benefits.)
	* Students participating in their school’s Head Start program are eligible for free milk.
	* Students who meet the definition of homeless or runaway are eligible for free milk.
	* Students may receive free milk if your household’s income is within the limits of the Federal Income Eligibility Guidelines. Your children may qualify for free milk if your household income falls at or below the limits on this chart:

**Federal Free Eligibility Income Chart
(Effective July 1, 2024, to** **June 30, 2025)**

| **Household size** | **Yearly** | **Monthly** | **Weekly** |
| --- | --- | --- | --- |
| **1** | 19,578 | 1,632 | 377 |
| **2** | 26,572 | 2,215 | 511 |
| **3** | 33,566 | 2,798 | 646 |
| **4** | 40,560 | 3,380 | 780 |
| **5** | 47,554 | 3,963 | 915 |
| **6** | 54,548 | 4,546 | 1,049 |
| **7** | 61,542 | 5,129 | 1,184 |
| **8** | 68,536 | 5,712 | 1,318 |
| **Each additional family member** | 6,994 | 583 | 135 |

1. **How do I know if my children qualify as homeless 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 you have not been told your children will get free milk, please call or e-mail **[insert school or homeless liaison].**
2. **Do I need to fill out an application for each child**? No. Use **one** Free School Milk 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 **[insert name, address, and telephone number]**.
3. **Should I fill out an application if I received a letter this school year saying my children are already approved for free milk?** No, but please read the letter carefully and follow the instructions. If any students in your household were missing from your eligibility notification, contact **[insert name, address, telephone number, and e-mail]** immediately.
4. **Can I apply online?** Yes. You are encouraged to complete the electronic online application instead of a paper application if you are able. The online application has the same requirements and will ask you for the same information as the paper application. Visit **[insert web site]** to begin or to learn more about the online application process. Contact **[insert name, address, telephone number, and e-mail] if you have any questions about the online application.**
5. **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 up to 30 operating days into the new school year (or until a new eligibility determination is made, whichever comes first). When the carryover period ends, unless you are notified that your children are directly certified or you submit an application that is approved, your children must pay for their milk. Though encouraged to do so, the LEA is not required to send a reminder or a notice of expired eligibility.
6. **I get WIC. Can my children get free milk?** Children in households participating in WIC **may** be eligible for free milk. Please send in an application.
7. **Will the information I give be checked?** Yes. We may also ask you to send written proof of the household income you report.
8. **If I don’t qualify now, may I apply later?** Yes, you may apply at any time during the school year. For example, students with a parent or guardian who becomes unemployed may become eligible for free milk if the household’s gross income drops below the income limit.
9. **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 **[insert name, address, telephone number, and e-mail]**.
10. **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 milk.
11. **What if my income is not always the same?** List the amount that you **normally** receive. For example, if you normally make $1,000 each month, but you missed some work last month and only made $900, put down that you made $1,000 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.
12. **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. When this happens, please write “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.
13. **We are in the military. Do we report our income differently**?Your basic pay and cash bonuses must be reported as income. Ifyou get any cash value allowances for off-base housing, food or clothing, or receive Family Subsistence Supplemental Allowance payments, these 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.
14. **What if there isn’t enough space on the application for my household?** List any additional household members on a separate piece of paper and attach to your application. Contact **[insert name, address, telephone number, and e-mail] to receive a second application.**
15. **My household needs more help. Are there other programs we might apply for?** To find out how to apply for SNAP, TFA, or Husky A benefits and to contact the Department of Social Services (DSS) office in your town, visit DSS’s [ConneCT Pre-Screening](https://connect.ct.gov/access/unauth/accessController?id=0.8995900050315657&languageCode=en) website or contact 1-855-6-CONNECT or 1-855-626-6632.

If you have other questions or need help, call **[insert telephone number]**.

Sincerely,

**[insert name and title]**

**Nondiscrimination Statement:** This explains what to do if you believe you have been treated unfairly.

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA’s TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant’s name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or
2. fax: (833) 256-1665 or (202) 690-7442; or
3. email: [program.intake@usda.gov](http://mailto:program.intake@usda.gov/)

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