

# PARENT INSTRUCTIONS FOR COMPLETING THE LUNCH APPLICATION ONLINE

This presentation will walk you through the process of completing the Free & Reduced Lunch Application for the 2019-2020 school year. We've listed the steps as well as provided "screen shots" of what your computer would look like at each stage. Pay attention to the yellow arrows on each screen.

Please contact the Help Desk at (512) 772-7199 if you need additional assistance.

Thank you!



# PARENT INSTRUCTIONS FOR COMPLETING THE LUNCH APPLICATION ONLINE

## Step 1:

Log in to your family access account. Choose one of your students from the drop down menu.

## Step 2:

Click on the Food Service tab on the left side of the screen.





Click on drop down arrow and choose a student.



You have unread messages

You are hiding messages



## Home

[New Student Online Enrollment](#)
[Returning Student Online Registration](#)
[Calendar](#)
[Attendance](#)
[Food Service](#)
[Discipline](#)
[Test Scores](#)
[Endorsements](#)
[Portfolio](#)
[Health Info](#)
[School Directory](#)
[Login History](#)

Click on Food Service.

**Returning Student Online Registration is now open until 09/30/2017**

Returning Student Online Registration at BASTROP HS for the 2017-2018 school year is now open, yet has not been completed for Robert.

[Go to Returning Student Online Registration for Robert](#)

**Returning Student Online Registration is now open until 09/30/2017**

Returning Student Online Registration at BASTROP MS for the 2017-2018 school year is now open, yet has not been completed for Jonathan.

[Go to Returning Student Online Registration for Jonathan](#)

**Returning Student Online Registration is now open until 09/30/2017**

Returning Student Online Registration at MINA EL for the 2017-2018 school year is now open, yet has not been completed for Kara.

[Go to Returning Student Online Registration for Kara](#)


**Scheduling Applications Unavailable**

Mon Jul 24, 2017 11:14am

**Be advised:**

All Family Access and Student Access applications related to course scheduling have been disabled in support of curriculum finalization for the 2017-2018 School Year.

For more information, please contact your campus.

**Thank you,**  
**BISD Technology Staff**

Mon Aug 21, 2017

**1st Day of School**  
 BASTROP MS

Mon Aug 21, 2017

**1st Day of School**  
 MINA EL

Mon Aug 21, 2017

**1st Day of School**  
 BASTROP HS

Mon Aug 21, 2017

**1ST PROGRESS REPORT Starts**  
 BASTROP HS

Mon Aug 21, 2017

**1ST SIX WEEKS Starts**  
 BASTROP HS

Mon Aug 21, 2017

**1ST PROGRESS REPORT Starts**  
 BASTROP MS

Mon Aug 21, 2017

**1ST SIX WEEKS Starts**  
 BASTROP MS

Mon Aug 21, 2017

**1ST PROGRESS REPORT Starts**  
 MINA EL

# PARENT INSTRUCTIONS FOR COMPLETING THE LUNCH APPLICATION ONLINE

## Step 3:

Click on Applications.

## Step 4:

When you do this, another box will pop up.



[Home](#)[New Student  
Online  
Enrollment](#)[Returning  
Student Online  
Registration](#)[Calendar](#)[Attendance](#)**[Food Service](#)**[Discipline](#)[Test Scores](#)[Endorsements](#)[Portfolio](#)[Health Info](#)[School Directory](#)[Login History](#)**Food Service**[Applications](#)**Current Account Balance**

\$0.00  
Lunch Type: NOT  
IDENTIFIED  
ECONOM  
DISADV

**Today's Lunch Menu**[Lunch Calendar](#)

No lunch menu details are available for the current date.

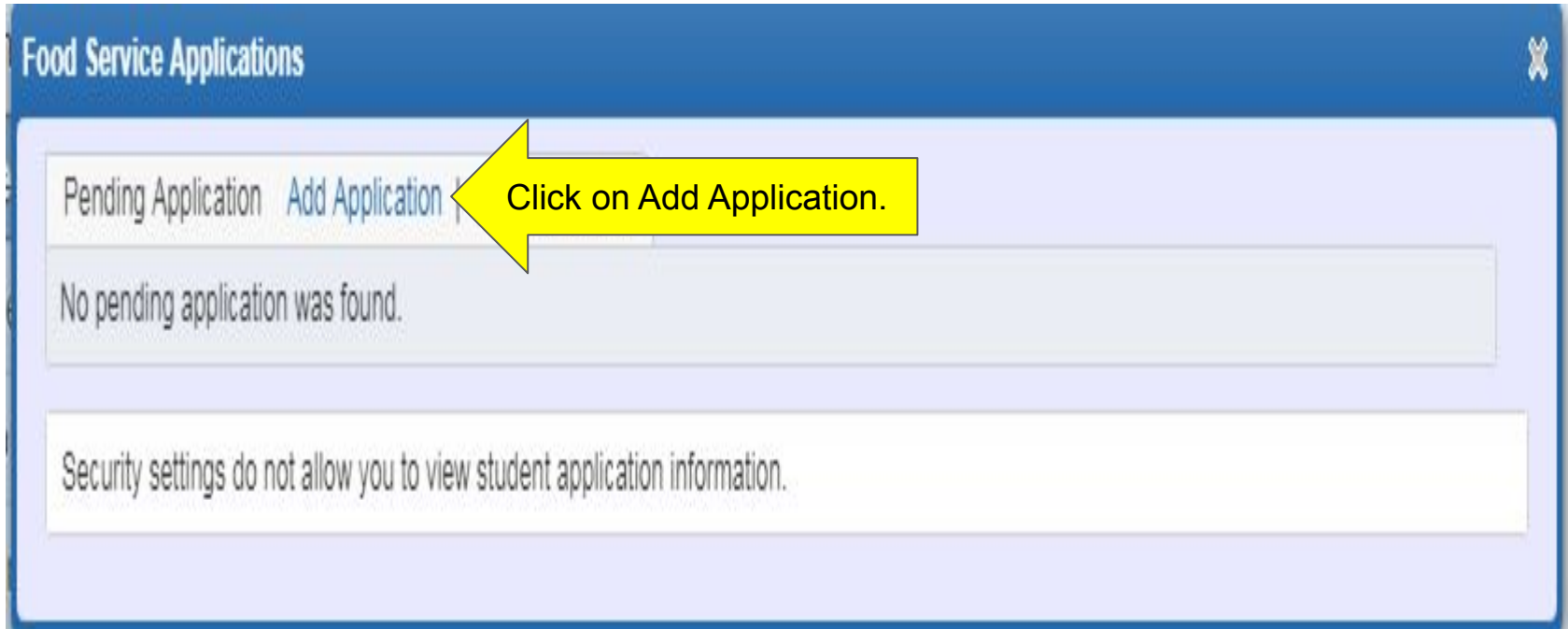
BASTROP MS) [View Totals](#)

There are no payment records for this student.



Click on Applications.

## 5. Then click on Add Application.



The screenshot shows a window titled "Food Service Applications" with a close button in the top right corner. The main content area contains a navigation bar with "Pending Application" and "Add Application" links. A yellow arrow points from a text box containing "Click on Add Application." to the "Add Application" link. Below the navigation bar, there are two message boxes: a grey one stating "No pending application was found." and a white one stating "Security settings do not allow you to view student application information."

Food Service Applications

Pending Application Add Application

Click on Add Application.

No pending application was found.

Security settings do not allow you to view student application information.



## 6. A letter explaining the application process displays; click Next after reading the letter.



The screenshot shows a web browser window with the URL <https://skyward.bisdtx.org/scripts/wsisa.dll/WService=wsEAPlus/sfamaedit020.w>. The page title is "Multi-Child Application for Free and Reduced-Price School Meals". The browser address bar shows "Secure" and "Select Language".

The page content is divided into two main sections:

- Steps:** A sidebar menu on the left lists the following steps:
  - Letter to Parents (highlighted with a right-pointing arrow)
  - Directions for Applying
  - Federal Income Chart
  - Privacy Act Statement
  - Non-discrimination Statement
  - Application
    - Step 1: Child Names
    - Step 2: Benefits
    - Step 3: Gross Income
    - Step 4: Signature
  - Review and Submit
- Multi-Child Application for Free and Reduced-Price School Meals:** The main content area displays a letter to parents/guardians. The letter text includes:

Dear Parent/Guardian:  
Children need healthy meals to learn. Bastrop ISD offers healthy meals every school day. Breakfast costs 1.50; lunch costs 2.70. **Your children may qualify for free meals or for reduced-price meals.** Reduced-price is .30 for breakfast and .40 for lunch. If you received a notification letter that a child is directly certified for free meals, do not complete an application. Let the school know if any children in the household attending school are not listed in the letter

The questions and answers that follow and attached directions provide additional information on how to complete the application. Complete only one application for all the students in the household and return the completed application to Child Nutrition Department 906 Farm St Bastrop, TX 78602. If you have questions about applying for free or reduced-price meals, Rosie Pacheco 512-772-7153.

  - Who can get free meals?**
    - Income** - Children can get free or reduced-price meals if a household's gross income is within the limits described in the Federal Income Eligibility Guidelines.
    - Special Assistance Program Participants** - Children in households receiving benefits from the Supplemental Nutrition Assistance Program (SNAP), Food Distribution Program on Indian Reservations (FDPIR), or Temporary Assistance for Needy Families (TANF), are eligible for free meals.
    - Foster** - Foster children who are under the legal responsibility of a foster care agency or court are eligible for free meals.
    - Head Start, Early Head Start, and Even Start** - Children participating in these programs are eligible for free meals.
    - Homeless, Runaway, and Migrant** - Children who meet the definition of homeless, runaway, or migrant qualify for free meals. If you haven't been told about a child's status as homeless, runaway, or migrant or you feel a child may qualify for one of these programs, please call or email Homeless liaison and migrant coordinator information.
    - WIC Recipient** - Children in households participating in WIC may be eligible for free or reduced-price meals.
  - What If I Disagree With the School's Decision About My Application?** Talk to school officials. You also may ask for a hearing by calling or writing to Sandra Callahan Chief Financial Officer 512-772-7100.
  - My Child's Application Was Approved Last Year. Do I Need To Fill Out A New One?** Yes. An application is only good for that school year and for the first few days of this school year. Send in a new application unless the school has told you that your child is eligible for the new school year.
  - If I Don't Qualify Now, May I Apply Later?** Yes. Apply at any time during the school year. A child 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 My Income Is Not Always the Same?** List the amount normally received. If a household member lost a job or had hours/wages reduced, use current income.
  - We Are in The Military. Do We Report Our Income Differently?** Basic pay and cash bonuses must be reported as income. Any cash value allowances for off-base housing, food, or clothing, or Family Subsistence Supplemental Allowance payments count as income. If housing is part of the Military Housing Privatization Initiative, do not include the housing allowance as income. Any additional combat pay resulting from deployment is excluded from income.
  - 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.
  - Will Application Information Be Checked?** Yes. We may also ask you to send written proof of the reported household income.
  - My Family Needs More Help. Are There Other Programs We Might Apply For?** To find out how to apply for other assistance benefits, contact your local assistance office or 2-1-1.
  - Can I Apply Online?** Yes! The online application has the same requirements and will ask you for the same information as the paper application. Visit <http://www.squaremeals.org> to begin or to learn more about the online application process. Contact Child Nutrition Department 512-772-7100 if you have questions about the online application.

A yellow arrow points from the text "After Reading click Next." to the "Next" button in the top right corner of the page.

7. After reading all the information and instructions, if you wish to continue, select the checkbox acknowledging that you have read the instructions and click Next.

Multi-Child Application for Free and Reduced-Price School Meals - Entity 041 - 05.17.06.00.05 - Google Chrome

Secure | https://skyward.bisdtx.org/scripts/wsisa.dll/WService=wsEApplus/sfamaedit020.w

### Multi-Child Application for Free and Reduced-Price School Meals

Select Language |

Previous Next Print Back

**Steps**

- Letter to Parents
- Directions for Applying
- Federal Income Chart
- Privacy Act Statement
- Non-discrimination Statement
- Application**
  - Step 1: Child Names
  - Step 2: Benefits
  - Step 3: Gross Income
  - Step 4: Signature
- Review and Submit

**Multi-Child Application**

**Directions for Applicants**

I have read the directions and would like to continue.

Please use these instructions to complete the free or reduced-price school meals application. Submit one application per household attend more than one school in Bastrop ISD. Please use a **pen** (not a pencil) when completing the application. The application must be filled out completely in order for the school to make a determination if the children in your household qualify for free or reduced-price school meals. An incomplete application cannot be approved. Please contact Rosie Pacheco 512-772-7153 with any questions.

**Your children may qualify for free or reduced price meals if your household income falls within the limits on this chart.**

**Reduced-Price Meal Income Eligibility Guidelines**  
July 1, 2017 - June 30, 2018

Family Size	Annually	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	22,311	1,860	930	859	430
2	30,044	2,504	1,252	1,156	578
3	37,777	3,149	1,575	1,453	727
4	45,510	3,793	1,897	1,751	876
5	53,243	4,437	2,219	2,048	1,024
6	60,976	5,082	2,541	2,346	1,173
7	68,709	5,726	2,863	2,643	1,322
8	76,442	6,371	3,186	2,941	1,471

**For each additional family member add:**

7,733	645	323	298	149
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**Step 1: List All Household Members Who Are Infants, Children, And Students Up To and Including Grade 12.**

- List each child's name.
  - Print the first name, middle initial, and last name for each child in the household in the spaces provided. If there are more children in the household than lines on the application, use the back of the application to record additional names.
  - Special Directions:** Include all members in the household who are age 18 or under and are supported with the household's income. Children do NOT have to be related to anyone in the household to be a part of the household.
- Check the box following the child's name if the child is a student in Bastrop ISD.
- Check the appropriate box if the child qualifies for free meals as participant in the foster care system; as a participant in a Head Start, Early Head Start, or Even Start program; or as a child meeting the criteria for homeless, migrant, or runaway.
  - Special Directions:** On this application, checking Foster indicates that a foster care agency or court has placed the child in your home. Foster children who live in the household may count as members of the household and may be listed on your application. If the application is being



8. Review the Federal Income Chart and select the box if you do not qualify for benefits or do not wish to continue. Click Next.

Multi-Child Application for Free and Reduced-Price School Meals - Entity 041 - 05.17.06.00.05 - Google Chrome

Secure | <https://skyward.bisdtx.org/scripts/wsisa.dll/WService=wsEAPlus/sfamaedit020.w>

### Multi-Child Application for Free and Reduced-Price School Meals

Select Language | ▼

Steps: Multi-Child Application for Free and Reduced-Price School Meals

Previous Next Print Back

Letter to Parents  
Directions for Applying  
➔ Federal Income Chart  
Privacy Act Statement  
Non-discrimination Statement

I do not qualify for benefits or do not wish to complete an application

**Check the box if you do qualify or you do not wish to continue.**

**If you do qualify and wish to continue, then click Next.**

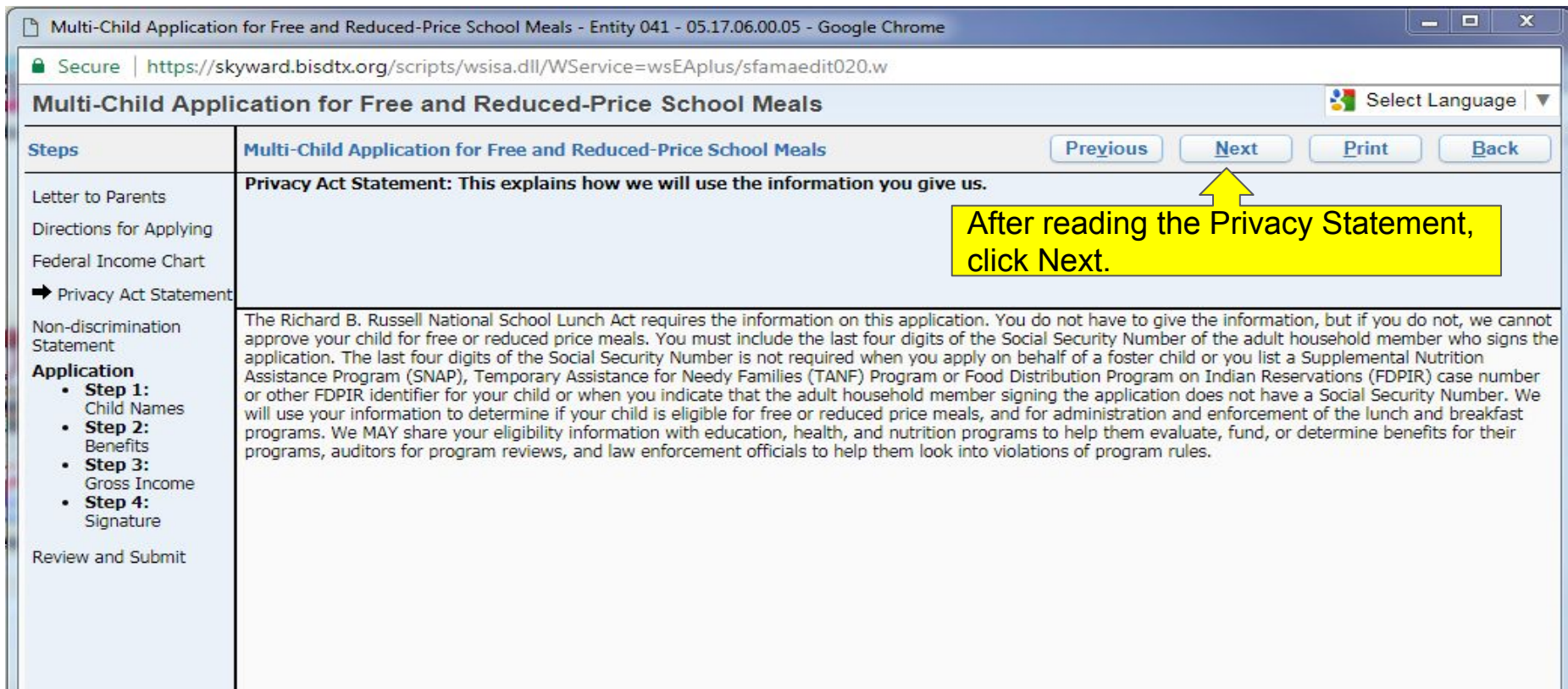
**Application**

- **Step 1:** Child Names
- **Step 2:** Benefits
- **Step 3:** Gross Income
- **Step 4:** Signature

Family Size	Annually	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	22,311	1,860	930	859	430
2	30,044	2,504	1,252	1,156	578
3	37,777	3,149	1,575	1,453	727
4	45,510	3,793	1,897	1,751	876
5	53,243	4,437	2,219	2,048	1,024
6	60,976	5,082	2,541	2,346	1,173
7	68,709	5,726	2,863	2,643	1,322
8	76,442	6,371	3,186	2,941	1,471
<b>For each additional family member add:</b>					
	7,733	645	323	298	149

Review and Submit

## 9. Read the Privacy Act Statement and any other statements, such as the Nondiscrimination Statement; click Next.



Multi-Child Application for Free and Reduced-Price School Meals - Entity 041 - 05.17.06.00.05 - Google Chrome

Secure | <https://skyward.bisdtx.org/scripts/wsisa.dll/WService=wsEApplus/sfamaedit020.w>

Select Language ▼

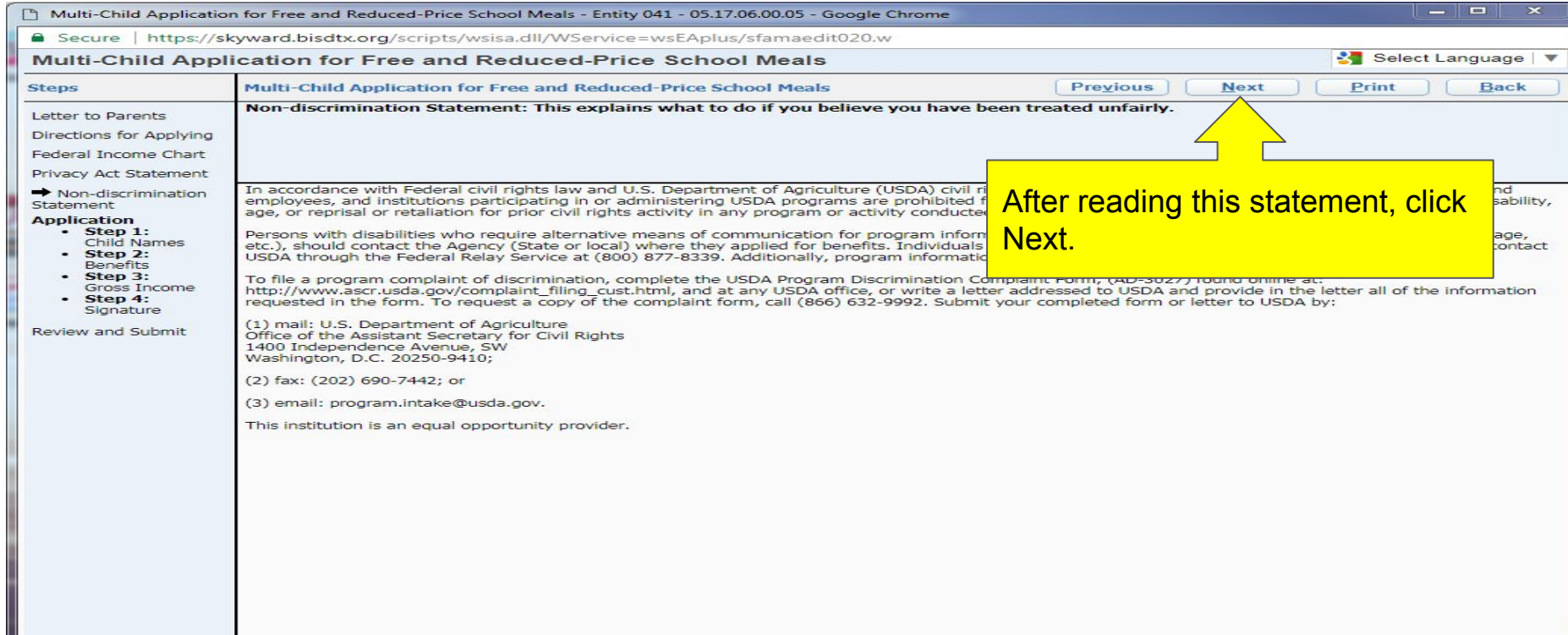
### Multi-Child Application for Free and Reduced-Price School Meals

Steps	Multi-Child Application for Free and Reduced-Price School Meals
Letter to Parents	<b>Privacy Act Statement: This explains how we will use the information you give us.</b>
Directions for Applying	
Federal Income Chart	<p>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.</p>
➔ Privacy Act Statement	
Non-discrimination Statement	
<b>Application</b> <ul style="list-style-type: none"><li>• <b>Step 1:</b> Child Names</li><li>• <b>Step 2:</b> Benefits</li><li>• <b>Step 3:</b> Gross Income</li><li>• <b>Step 4:</b> Signature</li></ul>	
Review and Submit	

Previous Next Print Back

After reading the Privacy Statement, click Next.

# 10. Read the Non-discrimination Statement and then click Next.



The screenshot shows a web browser window with the address bar displaying <https://skyward.bisdtx.org/scripts/wsisa.dll/WService=wsEPlus/sfamaedit020.w>. The page title is "Multi-Child Application for Free and Reduced-Price School Meals".

On the left side, there is a "Steps" menu with the following items:

- Letter to Parents
- Directions for Applying
- Federal Income Chart
- Privacy Act Statement
- ➔ Non-discrimination Statement
- Application**
  - Step 1: Child Names
  - Step 2: Benefits
  - Step 3: Gross Income
  - Step 4: Signature
- Review and Submit

The main content area is titled "Multi-Child Application for Free and Reduced-Price School Meals" and contains the following text:

**Non-discrimination 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, USDA, its employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, 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 (Braille, large print, audiotape, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf or hard of hearing should call USDA toll free at (800) 877-8339. Additionally, program information may be obtained on the USDA website at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](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:

(1) mail: U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; or

(3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov).

This institution is an equal opportunity provider.

Navigation buttons at the top right include "Previous", "Next", "Print", and "Back". A yellow arrow points to the "Next" button, and a yellow callout box contains the text: "After reading this statement, click Next."

11. Enter all household members. This includes all guardians, your student's, and children under school age. Select the appropriate boxes and click Next.

**Free and Reduced Price School Meals Family Application**

Steps: Free and Reduced Price School Meals Family Application

Buttons: Previous, Next, Print, Back

Letter to Parents

Instructions for Applying

Federal Income Chart

Privacy Act Statement

Non-discrimination Statement

Application

- Part 1: Household Names
- Part 2: Benefits
- Part 3: Gross Income
- Part 4: Signature
- Part 5:

**PART 1. ALL HOUSEHOLD MEMBERS**

Add More Names to Application

Click Next after all names have been entered.

Enter all Household Members and choose the appropriate boxes.

Names Living in (First, Middle Initial, Last)	member is not in school	to sign this form.					a foster, child. If homeless, to Part 4	Check if NO Income
		Foster	Homeless	Migrant	Runaway	Head Start		
(Example) Jane A. Smith	NA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Argentina Abastascr		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Jon Abbottscr	High School	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	



12. A validation message will appear, asking you to verify that the household members listed do not have income.

13. If appropriate, enter the benefit information, and click Next.

## **PART 2. BENEFITS**

If **any** member of your household receives **FoodShare, FDPIR or W-2 Cash Benefits**, provide the name of the household member, the program name, and case number (**not a Quest Card number**) for the person who receives benefits and skip to **Part 4**. If no one receives these benefits, go to **Part 3**

Name:

Program Name:

Case Number:



14. Enter the Total Household Gross Income information, and click Next. Note: Based on the household information provided earlier, names were copied into this section. Review the names and remove them, if necessary, based on the application instructions.

**PART 3. TOTAL HOUSEHOLD GROSS INCOME** (before deductions). List all income on the same line as the person who receives it. Select the box for how often it is received. Record each income only once. If you provided a case number in Part 2, you do **not** need to provide income information. If you enter '0' or leave any fields blank, you are certifying (promising) that there is no income to report.

Enter the Income for each person. Once done, click Next.

Add More Names to Application

1. Full Name First Name, Middle Initial, Last Name	2. Gross Income and How Often It Was Received ?							
	Earnings from Work Before Deductions		Welfare, Child Support, Alimony		Pensions, Retirement, Social Security, SSI, VA Benefits		All Other Income	
(Example) Jane A. Smith	\$199.99	W	\$149.99	B	\$99.99	M	\$50.00	M
Argentina Abastascr	\$1,125.00	B	\$0.00		\$0.00		\$0.00	

15. Read the Electronic Signature Agreement and click I Agree.

**Electronic Signature Agreement**

**Electronic Signature Agreement**

Under the Federal Electronic Signatures in Global and National Commerce Act, before you may submit this Food Service Account Application electronically, you must be provided with certain of the following information and you must affirmatively agree to the following and thereafter not withdraw your agreement.

Please take a moment to review and acknowledge your understanding and acceptance of this Agreement. By electronically signing this Food Service Account Application, I acknowledge receipt of the application agreement, and I agree to be bound by the terms and conditions of the agreement.

By clicking 'I Agree' and submitting this agreement via the internet, I acknowledge that:

- \* I have read and understood the foregoing Electronic Signature Agreement and that I intend to be bound thereby.
- \* I understand and agree that my electronic signature is the equivalent of a manual signature and that others may rely on it as such in connection with any and all agreements I may enter into, including but not limited to this Electronic Signature Agreement.
- \* I further acknowledge and agree that it is my obligation to immediately advise the school district of any change in my electronic address (i.e., email address).
- \* I further acknowledge and agree that it is my obligation to immediately advise the school district in the event that I withdraw my consent to this Electronic Signature Agreement.
- \* I acknowledge and agree that in the event that any person known to me (whether it be a family member, member of my household or otherwise) misappropriates any of the security devices connected with my Food Service account application and such misappropriation could not reasonably be detected by the school district, the school district shall have the right to treat all resulting electronic signatures as though they were affixed by the person whose name is typed below.
- \* I acknowledge and agree that the individual completing this electronic the individual in whose name the account is set up, or is someone authorized to act on behalf of

Click I Agree after reading statement.

16. Sign the application and enter the last four digits of your Social Security Number. The signature you provide will be an electronic signature.

**PART 4. SIGNATURE AND LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER (ADULT MUST SIGN)**

An adult household member must sign the application. **If Part 3 is completed, the adult signing the form also must list the last four digits of his or her Social Security Number or mark the 'I do not have a SSN' box. See Privacy Act Statement**

I certify (promise) **Enter your name here.** and that all income is reported to the Federal and State funds based on my tax return. I understand my child's eligibility information may be shared as allowed by law. **Enter your name here.**

\* Sign here:   \* Print Name:

Date:  Phone Number:  Ext:

Address:  Cell Phone Number:   Ext:

City:  State:  Zip Code:

\* Last Four Digits of SSN: \*\*\*-\*\*-  **Enter last 4 of Social Security Number Here.**

Email Address:

By providing your email address, you may be notified by email of your eligibility for free and reduced price school meals.

17. Enter the children's ethnic and racial identity and click Next. **This is optional.**

Free and Reduced Price School Meals Family Application

Previous Next Print Back

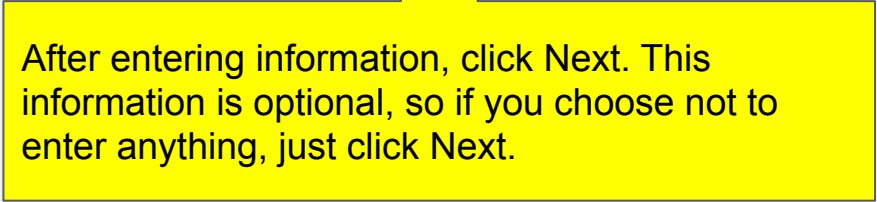
**PART 5. CHILDREN'S ETHNIC AND RACIAL IDENTITY (OPTIONAL)**

I would like to report this optional information

Mark one ethnic identity:    Mark one or more racial identities:

Hispanic/Latino     Asian     American Indian or Alaska Native     Black or African American

Not Hispanic/Latino     White     Native Hawaiian or Other Pacific Islander



18. Review the completed application and click the Submit Application button. Note: If at any point in the process you skipped a required field or entered incorrect data, a message appears explaining the errors. All errors must be corrected before you can submit the application for approval.

19. Once you have submitted your application, you may be able to Update a Pending Application, View the Application, and Print the Application.

**Food Service Applications**

[Pending Application](#) | [Update Pending Application](#) | [View Application](#) | [Print Application](#)

**Application Date: Tue Jan 26, 2016 (Application Waiting For Approval)**

**Notice: Pending Application will be marked as 'Not Submitted' if edited and will need to be resubmitted for review.**

**Household Members**

Names of Household Members	School Name	Foster Child?	No Income?
Argentina Abastascr		No	No
Jon Abbotscr	High School	No	Yes

**Income Information**

Family Member Name	Earnings from Work	Welfare, Child Support, Alimony	Pensions, Retirement, Social Security, SSI, VA Benefits	Other Income
Argentina Abastascr	29,250.00	0.00	0.00	0.00
<b>Total Annual Income: 29,250.00</b>				

**Jon (400)**

Temp Application	Application Date	Effective Date	Dependents	Lunch Code	Denied?	Active?	Application Nbr
No	Mon Jun 2, 2014	Mon Jun 2, 2014	5	Free/Gratis	No	Yes	
No	Fri Jun 28, 2013	Thu Sep 26, 2013	0	Free/Gratis	Yes	Yes	