



# COLORADO DEPARTMENT OF EDUCATION

201 East Colfax Avenue • Denver, Colorado 80203-1704  
303.866.6600 • www.cde.state.co.us

**William J. Moloney**  
Commissioner of Education

**Karen Stroup**  
Deputy Commissioner

**CN07-G-014**

TO: Nutrition Service Directors

FROM: Dan C. McMillan, Director, Nutrition and Transportation

DATE: May 29, 2007

SUBJECT: Start Smart Nutrition Program – Senate Bill 07-059  
Changes for the School Breakfast Program

---

On May 15, 2007, Governor Ritter signed into law Senate Bill 07-059, the Start Smart Nutrition Program. This legislation will have a very welcome impact on your School Breakfast Program (SBP) operations beginning with the 2007-08 school year. The bill was sponsored by Senator Sandoval, and co-sponsored by Representative Madden, at the request of the Colorado School Nutrition Association.

The legislation effectively eliminates the \$0.30 co-payment for reduced price breakfast, and instead, districts will receive \$0.30 from state funds in its place. Historically, the \$0.30 co-pay has been one of the major barriers for the children of many eligible families to consistently participate in the breakfast program. Shifting the \$0.30 co-payment to the state will have a positive effect, and increase participation of eligible children.

This change will require CDE to make modifications to its Online Claim System (already underway), and will also require districts to make a few modifications to the free and reduced price meal process.

**District action needed:**

***Effective July 1, you may no longer charge a meal price to reduced price students for breakfast (previously a maximum of \$0.30). They must receive their meal free of charge.*** Note that this change applies only to breakfast, not lunch. You must continue to count and claim breakfasts according to the student's eligibility status (paid, free or reduced). The \$0.30 payment from state funds will be handled automatically through the Online Claims System.

**If you have not yet printed your free and reduced price meal application materials for the 2007-08 school year:**

Substitute the revised *Letter to Parents* (attached) for the one included in the original packet sent to you earlier this spring. This now reflects the elimination of reduced price for breakfast, and clarifies that parents are still responsible to pay the reduced price for lunch (maximum of \$0.40).

Substitute the revised *Notification Letter for Free/ Reduced Price Meals* (attached), for the one included in the original packet sent to you earlier this spring. This now reflects the elimination of reduced price for breakfast, and clarifies that parents are still responsible to pay the reduced price for lunch (maximum of \$0.40).

If you utilize a software system for this process, please make the necessary changes to these documents, contacting your software provider as needed.

Await notification that the Online Claim System is ready for 2007-08, and follow instructions that will be provided. These instructions will include any new claim submission requirements on your part (if any), and the account codes for the new funding source. We do not anticipate any changes in file upload specifications.

**If your materials are already printed:**

Substitute the revised *Letter to Parents* (attached) for the one included in the original packet sent to you earlier this spring, **as it becomes practical to do so for new students during the year**. Although you may choose to reprint, it is not required to do so for this coming year. This now reflects the elimination of reduced price for breakfast, and clarifies that parents are still responsible to pay the reduced price for lunch (maximum of \$0.40).

Substitute the revised *Notification Letter for Free/ Reduced Price Meals* (attached), for the one included in the original packet sent to you earlier this spring. This now reflects the elimination of reduced price for breakfast, and clarifies that parents are still responsible to pay the reduced price for lunch (maximum of \$0.40).

If you utilize a software system for this process, please make the necessary changes to these documents, contacting your software provider as needed.

Await notification that the Online Claim System is ready for 2007-08, and follow instructions that will be provided. These instructions will include any new claim submission requirements on your part (if any), new screen layouts you may encounter, and the account codes for the new funding source. We do not anticipate any changes in file upload specifications.

Districts/schools that have been approved for Provision 2 for breakfast should not need to take any specific action, as your meals are being served free to all children. The additional \$0.30 payment from state funds will be handled automatically through the Online Claim System.

Please note that these state funds are subject to appropriation each year. CDE will be including the funds in our annual budget request, but they are not guaranteed.

You may access a copy of SB07-059 on the General Assembly web site at <http://www.leg.state.co.us/>.

If you have any questions, or have a situation that is not addressed in this memo, please contact Herminia Vigil at 303.866.6661, or 888.245.6092 (outside the Denver Metro area).

Dear Parent/Guardian:

Children need healthy meals to learn. **[Name of school]** offers healthy meals every school day. Breakfast cost **[\$]**; and lunch cost **[\$]**. Your children may qualify for free meals or for reduced price meals. The reduced price is **[\$]** for lunch. *There is no charge for reduced price breakfast.*

Complete **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: [name, address, phone number].**

*Here are answers to questions you may have about applying:*

**1. Who can get free or reduced price meals?** Children in households getting Food Stamps and most foster children can get free meals regardless of your income. Also, your children can get free or reduced price meals if your household income is within the limits on the Federal Income Chart.

Household Size	Income Chart		
	Annual	Monthly	Weekly
1	\$18,889	\$1,575	\$ 364
2	\$25,327	\$2,111	\$ 488
3	\$31,765	\$2,648	\$ 611
4	\$38,203	\$3,184	\$ 735
5	\$44,641	\$3,721	\$ 859
6	\$51,079	\$4,257	\$ 983
7	\$57,517	\$4,794	\$1,107
8	\$63,955	\$5,330	\$1,230
For each additional member add....	+ 6,438	+ 537	+ 124

**2. Will the information I give be checked?** Yes, we may ask you to send written proof of the information you give.

**3. Can homeless, runaway and migrant children get free meals?** Please call **[school, homeless liaison or migrant coordinator]** to see if your child(ren) qualify, if you have not been informed that they will get free meals.

**4. If I don't qualify now, may I apply again later?** Yes. You may apply at any time during the school year if your household size goes up, income goes down, or if you start getting Food Stamps. If you lose your job, your children may be able to get free or reduced price meals during the time you are unemployed.

**5. 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: **[name, address, phone number].**

**6. May I apply if someone in my household is not a U.S. citizen?** Yes. You or your child(ren) do not have to be a U.S. citizen to qualify for free or reduced price meals.

**7. Who should I include as members of my household?** You must include all people living in your household, related or not (such as grandparents, other relatives, or friends). You must include yourself and all children who live with you.

**8. What if my income is not always the same?** List the amount that you normally get. For example, if you normally get \$1000 each month, but you missed some work last month and only got \$900, put down that you get \$1000 per month.

**9. We are in the military, do we include our housing allowance as income?** If your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. All other allowances must be included in your gross income.

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

Sincerely,

**[signature]**

**Privacy Act Statement: This explains how we will use the information you give us.**

The 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 children for free or reduced price meals. The Social Security Number of the adult household member who signs the application is required unless you list a Food Stamp case number, OR if you are applying for a foster child. You must check the "I do not have a Social Security Number" box if the adult household member signing the application does not have a Social Security Number. We WILL use your information to see if your children are eligible for free or reduced price meals, to run the program, and to enforce the rules of the program. 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 misuse of program rules.

**Non-discrimination Statement: This explains what to do if you believe you have been treated unfairly.** In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write to *USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington DC 20250-9410* or call (800)795-3272 (voice) or (202)720-6382 (TTY). USDA is an equal opportunity provider and employer.

**2007-2008 NOTIFICATION LETTER FOR FREE/REDUCED PRICE MEALS**

---

Dear \_\_\_\_\_:

Your application for free/reduced price meals has been:

- Approved for free meals.
- Approved for reduced price lunch at [\$]. There is no charge for reduced price breakfast meals.
- Denied for the following reason(s):  
\_\_\_\_\_  
\_\_\_\_\_
- Income is over the allowable amount.
- Incomplete application. The following information is missing:  
\_\_\_\_\_  
\_\_\_\_\_
- Other \_\_\_\_\_

If you do not agree with the decision, you may discuss it with the designated school official, and you have a right to a fair hearing. This can be done by calling or writing the following official:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

If you are not eligible now but have a decrease in household income, or have an increase in family size, fill out an application at that time. If you lose your job, your children may be able to get free or reduced price meals during the time you are unemployed.

You may reapply for benefits at any time during the school year.

Sincerely,

\_\_\_\_\_

**Name**

\_\_\_\_\_

**Title**

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write to *USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington DC 20250-9410* or call (800)795-3272 (voice) or (202)720-6382 (TTY). USDA is an equal opportunity provider and employer.

## 2007-2008 CARTA A LAS FAMILIAS SOBRE LOS PROGRAMAS DE COMIDA ESCOLARES

Estimado Padre de Familia/Guardián:

Los niños necesitan comida nutritiva para aprender. **[Name of School]** ofrece comidas nutritivas todos los días de escuela. El desayuno tiene un precio de **[\$]**; el almuerzo **[\$]**. Sus niños podrían calificar para comidas gratis o para comidas de precio reducido. El precio reducido es **[\$]** para el almuerzo. *No hay carga para el desayuno de precio reducido.*

Complete la forma para aplicar para comidas gratis o de precio reducido. Use una solicitud gratis o a precio reducido para todos los estudiantes en su hogar. Nosotros no podemos aprobar una aplicación incompleta, así es que asegúrese de llenar toda la información requerida. **Envíe la aplicación completa a: [name, address, phone number].**

*Aquí hay algunas respuestas a preguntas que podría haber en el proceso de aplicación:*

1. **¿Quién puede recibir comidas gratis o de precio reducido?** Los niños en hogares que reciben Cupones para Alimentos y la mayoría de los menores a cargo de servicios sociales pueden recibir comidas gratis sin importar sus ingresos. También si su ingreso familiar está dentro de los límites de la Tabla Federal de Ingresos, sus niños pueden recibir comidas gratis o de precio reducido.
2. **¿Pueden los niños sin hogar, niños que han abandonado su hogar y niños emigrantes recibir comidas gratis?** Si no le han informado que sus hijos recibirán comidas gratis, por favor comuníquese con: **[school, homeless liaison or migrant coordinator]** para verificar si sus hijos califican.
3. **¿Debo llenar una solicitud si este año escolar recibí una carta que dice que mis hijos fueron aprobados para comidas gratis o a precio reducido?** Por favor, lea la carta que recibió y siga las instrucciones. Llame a la escuela al **[phone number]** si tiene preguntas.
4. **¿Será verificada la información que yo provea?** Sí, nosotros podríamos pedirle que mande prueba escrita de la información provista.
5. **Si yo no califico ahora ¿puedo aplicar después?** Sí. Usted puede aplicar en cualquier momento durante el año escolar si el tamaño de su familia aumenta, sus ingresos disminuyen, o si comienza a recibir Cupones para Alimentos. Si usted pierde su trabajo, sus niños podrían recibir comidas gratis o de precio reducido durante el tiempo que usted esté sin empleo.
6. **¿Qué pasa si no estoy de acuerdo con la decisión de la escuela con respecto a mi aplicación?** Usted deberá hablar con los oficiales de la escuela. Usted también podría solicitar una audiencia ya sea llamando o escribiendo a: **[name, address, phone number].**
7. **¿Puedo solicitar aunque alguien en mi hogar no sea ciudadano americano?** Sí. Ni usted ni sus niños necesitan ser ciudadanos americanos para recibir comidas gratis o a precio reducido.
8. **¿A quienes tengo que incluir como miembros de mi familia?** Usted debe incluir a todas las personas que vivan en su hogar aunque no sean parientes suyos (por ejemplo, abuelos, otros parientes o amigos). Usted también debe incluirse a sí mismo y a todos los niños que viven con usted.
9. **Nosotros estamos en el servicio militar, ¿debemos incluir nuestro subsidio para vivienda como parte de nuestro ingreso?** Si su vivienda es parte de la Iniciativa de Privatización de Viviendas para Militares usted no necesita incluir el subsidio para vivienda como parte de su ingreso. Otros suplementos deben ser incluidos como parte de su ingreso.

CUADRO DE INGRESOS			
Miembros de la Familia	Anual	Mensual	Semanal
1	\$18,889	\$1,575	\$ 364
2	\$25,327	\$2,111	\$ 488
3	\$31,765	\$2,648	\$ 611
4	\$38,203	\$3,184	\$ 735
5	\$44,641	\$3,721	\$ 859
6	\$51,079	\$4,257	\$ 983
7	\$57,517	\$4,794	\$1,107
8	\$63,955	\$5,330	\$1,230
Por cada familiar extra, se anade....	+ 6,438	+ 537	+ 124

*Si usted tiene otras preguntas, por favor llame al teléfono: [phone number].*

Sinceramente,

**[signature]**

**Declaración del Acta de Privacidad:** Esto explica como nosotros usaremos la información que usted nos brinde.

El Acta del Almuerzo Nacional Escolar exige la información en esta aplicación. Usted no tiene que dar la información pero si no lo hace, nosotros no podemos autorizar que sus hijos reciban comidas gratis o de precio reducido. Se requiere el Número de Seguro Social del miembro adulto del hogar quien firma la aplicación, a no ser que se liste el número de caso de Cupones para Alimentos o si usted está aplicando para menores a cargo de servicios sociales. Usted tiene que marcar la caja que dice "Yo no tengo Número de Seguro Social" si el miembro adulto del hogar firmando la aplicación no tiene un Número de Seguro Social. Nosotros USAREMOS su información para evaluar si sus hijos califican para comidas gratis o de precio reducido, para desarrollar el programa, y para cumplir con las reglas del programa. Nosotros podríamos COMPARTIR su información de elegibilidad con programas de educación, salud y nutrición para ayudarles a evaluar, financiar o determinar beneficios para sus programas, auditores para revisar programas, y personal de justicia para ayudarles a investigar el uso irresponsable de las reglas del programa.

**Declaración de No-Discriminación:** Esto explica qué hacer si usted cree que se le ha tratado injustamente. De acuerdo con la ley Federal y la póliza del Departamento de Agricultura, está prohibido que ésta institución discrimine basado en la raza, el color, la nacionalidad, el sexo, la edad o la incapacidad. Para presentar una queja por discriminación, por favor escriba a *USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington DC 20250-9410* o llame al (800)795-3272 (voz) o (202)720-6382 (TTY). USDA es un empleador y proveedor de igualdad en las oportunidades de trabajo.

## 2007-2008 NOTIFICACIÓN DE COMIDAS GRATIS A PRECIO REDUCIDO

---

Estimado (a) \_\_\_\_\_:

Su solicitud para comidas gratis de precio reducido ha sido:

- Aprobada para comidas gratis.
- Aprobada para precio reducido. El precio reducido es **[\$]** para el almuerzo. *No hay carga para el desayuno de precio reducido.*
- Negada por las siguientes razones:
  - Sus ingresos exceden la cantidad permitida.
  - Solicitud incompleta. Falta la siguiente información:  
\_\_\_\_\_  
\_\_\_\_\_
  - Otra razón: \_\_\_\_\_

Si no está de acuerdo con la decisión, puede discutirla con el oficial escolar y tiene derecho a una conferencia imparcial. Esto se puede hacer por llamar o escribir a:

Nombre \_\_\_\_\_  
Dirección \_\_\_\_\_  
Teléfono \_\_\_\_\_

Puede solicitar beneficios de nuevo a cualquier tiempo durante el año escolar. Si usted no es elegible ahora, pero si reduce el total de sus ingresos, quede sin empleo, o aumente el número de su familia, llena una solicitud entonces.

Atentamente,

---

Nombre

---

Título

**Declaración de No-Discriminación: Esto explica qué hacer si usted cree que se le ha tratado injustamente.** De acuerdo con la ley Federal y la póliza del Departamento de Agricultura, está prohibido que ésta institución discrimine basado en la raza, el color, la nacionalidad, el sexo, la edad o la incapacidad. Para presentar una queja por discriminación, por favor escriba a *USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington DC 20250-9410* o llame al (800)795-3272 (voz) o (202)720-6382 (TTY). USDA es un empleador y proveedor de igualdad en las oportunidades de trabajo.