**[School District/LEA Name]** **[Date]**

Dear **[Name]**:

On **[Date First Notice Was Sent]**, you were sent a letter – ‘We Must Check Your Application’.

We requested that you respond to the letter by **[Date Response Was Requested]** to ensure that your child(ren) continues to receive free or reduced-price meal benefits.

You have not responded, nor provided information that proves your child(ren) is/are eligible to receive free or reduced-price meal benefits.

Therefore, consider this the final notice that, unless we hear from you by 10 days from the date on this letter, your child(ren)’s free or reduced-price meal benefits will be discontinued. Your child(ren) will then have to pay full price for his/her meals, effective **[Final Date To Receive Information]**.

If you have any questions or if you need any help, please call **[Contact Person's Name]** at **[Phone Number]**.

Sincerely,

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****[Name of Signee]**

The Richard B. Russell National School Lunch Act requires the information requested in order to verify your children’s eligibility for free or reduced-price meals. If you do not provide the information or provide incomplete information, your children may no longer receive free or reduced-price meals.

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, religious creed, disability, age, political beliefs, 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:

(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)

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