

Sub-template

Description/Example

primary address & income

Signer Confirmation Title
Signer Confirmation

Signer Confirmation Instructions Header
Please review the application signer's name and household address below. Confirm you are the person signing this online application by selecting 'Next'. Select 'Out' if you are not this person or if you do not wish to continue.

Meal Benefits Application

Please review the application signer's name and household address below. Confirm you are the person signing this online application by selecting 'Next'. Select 'Out' if you are not this person or if you do not wish to continue.

Smith, James you have been identified as the household member signing this Meal Benefits Application.

You are applying for meal benefits for all household members living at the address below. If the address is incorrect, you may update it in the Household Information section of the Portal.

Primary Address
4321 109th St NE
Blaine, MN 55449

Signer without Self-Service Instructions

The Signer without Self-Service Instructions provides the parent/guardian with information about what they should do if their primary address is incorrect.

SIGNER CONFIRMATION

Signer without Self-Service Instructions
You are applying for meal benefits for all household members living at the address below. If the address is incorrect, please contact your children's school to request a change.

Meal Benefits Application

Please review the application signer's name and household address below. Confirm you are the person signing this online application by selecting 'Next'. Select 'Out' if you are not this person or if you do not wish to continue.

Smith, James you have been identified as the household member signing this Meal Benefits Application.

You are applying for meal benefits for all household members living at the address below. If the address is incorrect, please contact your children's school to request a change.

Primary Address:
4321 109th St NE
Blaine, MN 55449

Signer without Self-Service Instructions

If the district has enabled the **Allow Change Requests for Household Data** preference ([System Administration > Portal > Preferences > Self-Service](#)) the parent/guardian will see the Signer with Self-Service Instructions displayed. If this preference is not enabled, Signer without Self-Service Instructions will be displayed. Campus recommends both instruction sections be completed in case Self-Service preferences are enabled/disabled throughout the school year.

SIGNER CONFIRMATION

Signer with Self-Service Instructions
You are applying for meal benefits for all household members living at the address below. If the address is incorrect, you may update it in the Household Information section of the Portal.

Meal Benefits Application

Please review the application signer's name and household address below. Confirm you are the person signing this online application by selecting 'Next'. Select 'Out' if you are not this person or if you do not wish to continue.

Smith, James you have been identified as the household member signing this Meal Benefits Application.

You are applying for meal benefits for all household members living at the address below. If the address is incorrect, you may update it in the Household Information section of the Portal.

Primary Address:
4321 109th St NE
Blaine, MN 55449

Household Members

Household Members Instructions Header

Provides information to the parent/guardian about how to identify household members.

HOUSEHOLD MEMBERS

The Household Members, Adding Household Members and Adding Meal Benefits Instructions Headers provide information to the parent/guardian about identifying and adding household members and adding a meal benefit case number.

Household Members Title
Household Members

Household Members Instructions Header
Household Members are listed below. You must confirm each person living in your household by selecting the check box next to their name. If a person listed below is no longer living in your household, do not check the box next to their name. If there are persons missing from your household you will need to add them by selecting the 'Add Household Member' button. You are not allowed to edit existing household member information or delete the application. Agree After you are identified and/or added household members select 'Next' to continue.

Meal Benefits Application

Household Members are listed below. You must confirm each person living in your household by selecting the check box next to their name. If a person listed below is no longer living in your household, do not check the box next to their name. If there are persons missing from your household you will need to add them by selecting the 'Add Household Member' button. You are not allowed to edit existing household

Sub-template

Description/Example

Adding Household Members Instructions Header

The Adding Household Members Instructions Header provides information to the parent/guardian about the type of person being added to the household. A student is a person who will be enrolled in the school district during the school year. A non-student is a person who will not be enrolled in the school district during the school year. A student member has required fields including Last Name, First Name, Gender, Date Of Birth, School and Grade. The School and Grade dropdown list includes an "unknown" option if the parent/guardian is unaware what school/grade the student will be enrolled.

Adding Meal Benefits Instructions Header

The Adding Meal Benefits Instructions Header provides information to the parent/guardian about how to select the name of the person receiving the benefits and entering the benefit case number. The district may include additional information regarding case # formats, etc.

Child Members

Child Members Instructions Header

The Child Members Instruction Header provides information to the parent/guardian about how the Child Members of the household are selected. A child is a person who will be enrolled in the school district during this school year. Non-student members should not be selected. It is not possible to deselect a manually added child.

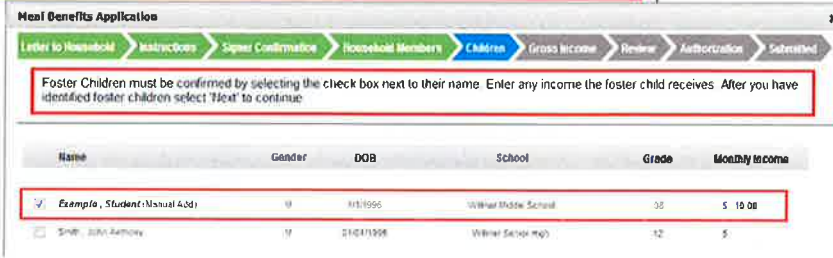
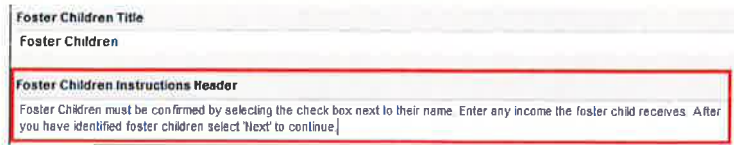
Sub-template

Description/Example



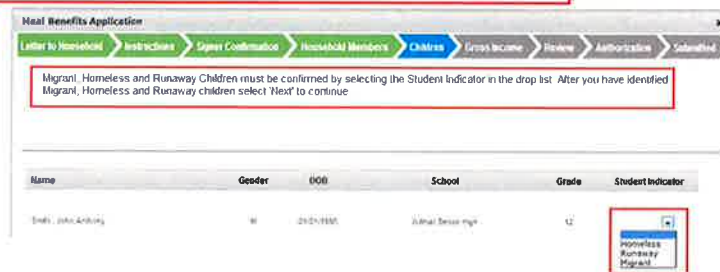
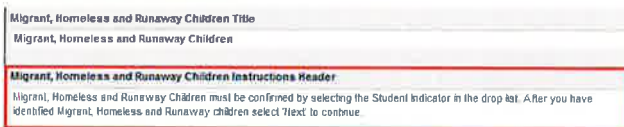
Foster Children Instructions Header

The Foster Children Instructions Header provides information to the parent/guardian about how Foster Children are selected and how to enter foster income.



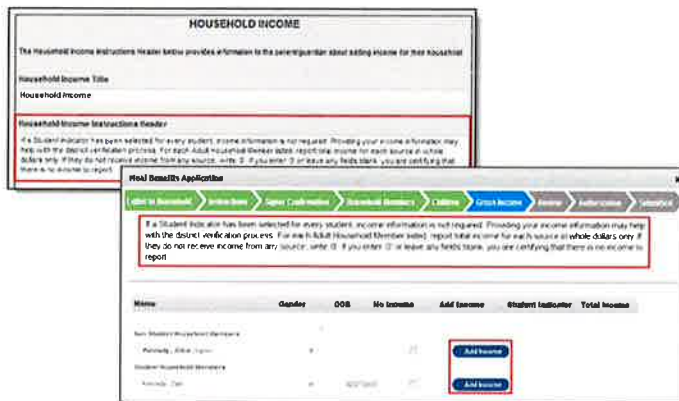
Migrant, Homeless and Runaway Children Instructions Header

Provides information to the parent/guardian about how Migrant, Homeless and Runaway Children are selected.



Household Income Instructions Header

Provides information to the parent/guardian about how the income must be entered for each household member.



Summary Review

Summary Review Instructions Header

provides information to the parent/guardian about reviewing and correcting the entered information.



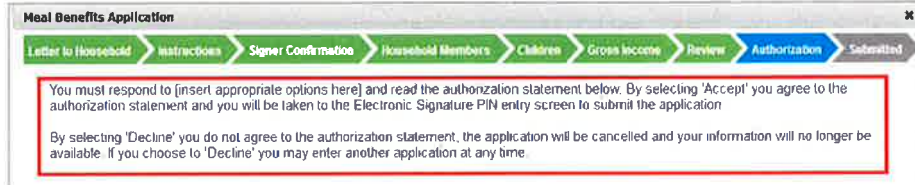
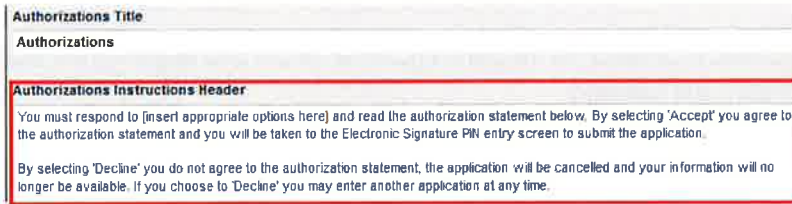
Sub-template



Authorizations

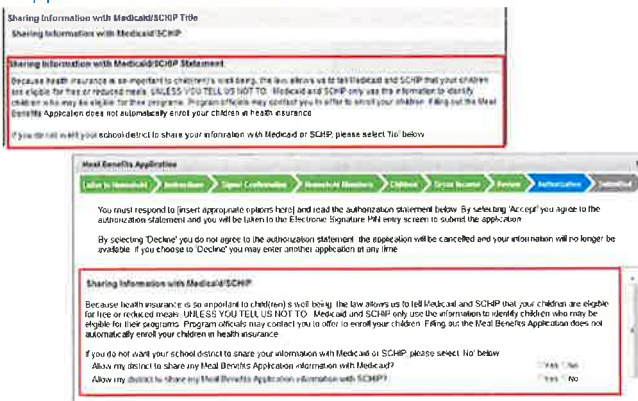
Authorizations Instructions Header

The Authorizations Instructions Header provides information to the parent/guardian about the options available in this step of the online application process. Authorizations may include all or some of the following depending upon State and/or District requirements: Sharing information with Medicaid/SCHIP, Sharing information with Other Programs, Information about Social Security Number entry, and the Authorization Statement. The header should be modified to reflect what the parent/guardian will be required to complete.



Sharing Information with Medicaid/SCHIP Statement

The 'Sharing Information with Medicaid/SCHIP Statement' will only appear to the parent/guardian if the States requires this data to be collected. To enable 'Display Medicaid opt out' and/or 'Display SCHIP opt out' options to to [FRAM > FRAM Preferences > Application Preferences](#).



Social Security Number Statement

The 'Social Security Number Statement' will only appear to the parent/guardian if it is an income application.



Sub-template

Description/Example

Meal Benefits Application

You must respond to [insert appropriate options here] and read the authorization statement below. By selecting 'Accept' you agree to the authorization statement and you will be taken to the Electronic Signature PIN entry screen to submit the application.

By selecting 'Decline' you do not agree to the authorization statement, the application will be cancelled and your information will no longer be available. If you choose to 'Decline' you may enter another application at any time.

Social Security Number

The income section of the application has been filled out. You are required to provide the last four digits of your SSN. Please enter the last four digits of your SSN or mark the "I do not have a SSN" box.

Race and Ethnicity Statement

The Race and Ethnicity statement appears to all parents/guardians. However, responding to this section is optional and does not affect eligibility for free or reduced price meals. The race and ethnicity information is linked to the Household application and not to a specific person.

Race and Ethnicity Title

Optional-Children's Racial and Ethnic Identities

Race and Ethnicity Statement

We are required to ask for information about your children's race and ethnicity. This information is important and helps to make sure we are fully serving our community. Responding to this section is optional and does not affect your children's eligibility for free or reduced price meals.

Meal Benefits Application

You must respond to [insert appropriate options here] and read the authorization statement below. By selecting 'Accept' you agree to the authorization statement and you will be taken to the Electronic Signature PIN entry screen to submit the application.

By selecting 'Decline' you do not agree to the authorization statement, the application will be cancelled and your information will no longer be available. If you choose to 'Decline' you may enter another application at any time.

Optional-Children's Racial and Ethnic Identities

We are required to ask for information about your children's race and ethnicity. This information is important and helps to make sure we are fully serving our community. Responding to this section is optional and does not affect your children's eligibility for free or reduced price meals.

Ethnicity (check one)

- Hispanic or Latino
- Not Hispanic or Latino
- No Response

Race (check one or more)

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

Sharing Information with Other Programs

The Sharing Information with Other Programs will only appear to the parent/guardian if the State/District requires this data to be collected. This set up needs to be completed prior to creating the Authorization Instructions Template.

Sharing Information with Other Programs Title

Sharing Information with Other Programs

Sharing Information with Other Programs Statement

If your child is eligible for free or reduced priced meals, he or she may also qualify to receive other benefits. You must give your permission for us to share your child(ren)'s name and meal eligibility status with staff in charge of other school programs.

Filing out the Meal Benefits Application does not automatically qualify your child(ren) to receive other benefits.

Meal Benefits Application

You must respond to [insert appropriate options here] and read the authorization statement below. By selecting 'Accept' you agree to the authorization statement and you will be taken to the Electronic Signature PIN entry screen to submit the application.

By selecting 'Decline' you do not agree to the authorization statement, the application will be cancelled and your information will no longer be available. If you choose to 'Decline' you may enter another application at any time.

Sharing Information with Other Programs

If your child is eligible for free or reduced priced meals, he or she may also qualify to receive other benefits. You must give your permission for us to share your child(ren)'s name and meal eligibility status with staff in charge of other school programs.

Filing out the Meal Benefits Application does not automatically qualify your child(ren) to receive other benefits.

allow my child(ren)'s name and meal eligibility to be shared with staff in charge of Other School Programs YES NO

Authorization Statement

The Authorization Statement will always appear to the parent/guardian. It is the last step of the application process prior to entering the electronic signature. USDA and your State requires specific statements be provided to the parent/guardian.

Authorization Title

Authorization Statement

Authorization Statement

I certify (promise) that all information on this application is true and that all income (if required) is reported. I understand that the school will receive Federal funds based on the information I provide. I understand that school officials may verify (check) the information. I understand that if I purposely provide false information, my children may lose benefits, and I may be prosecuted.

Meal Benefits Application

You must respond to [insert appropriate options here] and read the authorization statement below. By selecting 'Accept' you agree to the authorization statement and you will be taken to the Electronic Signature PIN entry screen to submit the application.

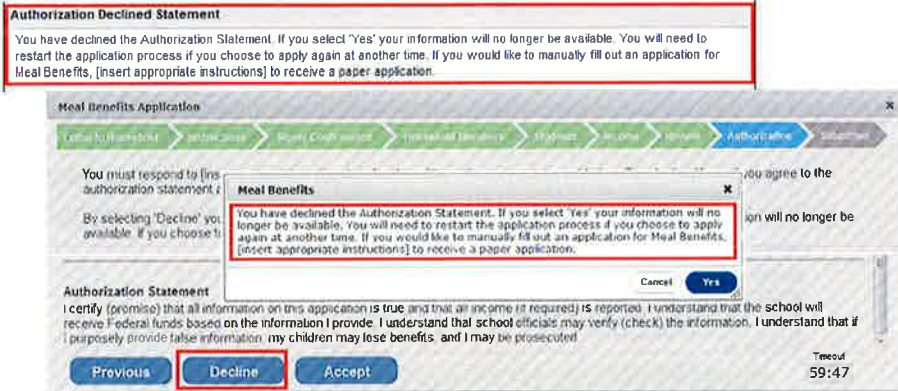
By selecting 'Decline' you do not agree to the authorization statement, the application will be cancelled and your information will no longer be available. If you choose to 'Decline' you may enter another application at any time.

Authorization Statement

I certify (promise) that all information on this application is true and that all income (if required) is reported. I understand that the school will receive Federal funds based on the information I provide. I understand that school officials may verify (check) the information. I understand that if I purposely provide false information, my children may lose benefits, and I may be prosecuted.

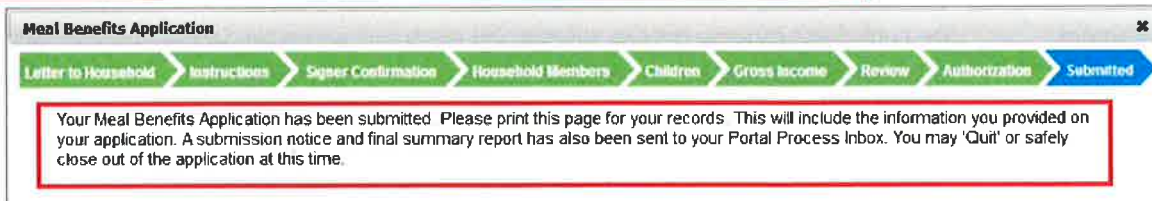
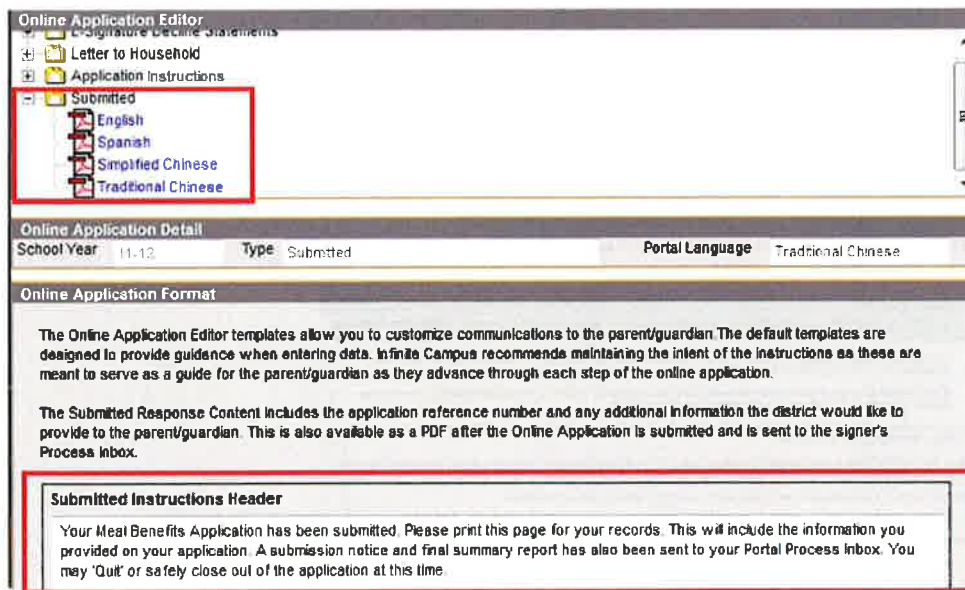
Authorization Declined Statement

Description/Example: 'Authorization Declined Statement' message will appear to the parent/guardian if they decline the Authorization Statement. Campus recommends the District add appropriate information to the parent/guardian.



Submitted

The Submitted Response Instructions Header provides information to the parent/guardian about the submitted application, inbox message and how to print the PDF.



Submitted Response Content

The Submitted Response Content provides information to the parent/guardian about the application reference number and any additional information the district would like to provide. This is also available as a PDF in the signer's inbox.

Online Application Editor

- Signature Decline Statements
- Letter to Household
- Application Instructions
- Submitted
 - English
 - Spanish
 - Simplified Chinese
 - Traditional Chinese

Online Application Detail

School Year	11-12	Type	Submitted	Portal Language	Traditional Chinese
-------------	-------	------	-----------	-----------------	---------------------

Online Application Format

The Online Application Editor templates allow you to customize communications to the parent/guardian. The default templates are designed to provide guidance when entering data. Infinite Campus recommends maintaining the intent of the instructions as these are meant to serve as a guide for the parent/guardian as they advance through each step of the online application.

The Submitted Response Content includes the application reference number and any additional information the district would like to provide to the parent/guardian. This is also available as a PDF after the Online Application is submitted and is sent to the signer's Process Inbox.

Submitted Instructions Header

Your Meal Benefits Application has been submitted. Please print this page for your records. This will include the information you provided on your application. A submission notice and final summary report has also been sent to your Portal Process inbox. You may 'Quit' or safely close out of the application at this time.

Meal Benefits Application

Letter to Household → Instructions → Signer Confirmation → Household Members → Children → Gross Income → Review → Authorization → Submitted

Your Meal Benefits Application has been submitted. Please print this page for your records. This will include the information you provided on your application. A submission notice and final summary report has also been sent to your Portal Process Inbox. You may 'Quit' or safely close out of the application at this time.

