



Instructions to Complete Application

Teaching and Learning Support
Child Nutrition Services
801 West 10th Street, Suite 200
PO Box 110500
Juneau, Alaska 99801-1894
(907) 465-8709

Instructions for Households to complete Application for Child Nutrition Programs

Use a separate application for each foster child. List the household children together.

If you are applying for a FOSTER CHILD, follow these instructions:

- Number 1:** List the child's name, school, and grade.
- Number 2:** Skip this part.
- Number 3:** List the child's personal use monthly income, if any.
- Number 4:** Skip this part.
- Number 5:** Sign the form. A Social Security Number is not necessary.
- Number 6:** Optional, answer this question if you choose to.

If your household gets FOOD STAMPS or ATAP/TANF, follow these instructions:

- Number 1:** List each child's name, school, and grade.
- Number 2:** List each child's Food Stamp or ATAP/TANF case number.
- Number 3:** Skip this part. **Number 4:** Skip this part.
- Number 5:** Sign the form. A Social Security Number is not necessary.
- Number 6:** Optional, answer this question if you choose to.

ALL OTHER HOUSEHOLDS, follow these instructions:

- Number 1:** List each child's name, school, and grade.
- Number 2:** Skip this part. **Number 3:** Skip this part.
- Number 4:** Follow these instructions to report total household income from last month.
 - Column A–Name:** List the first and last name of **each** person living in your household, related or not (such as grandparents, other relatives, or friends). You must include yourself and all children. Attach another sheet of paper if you need to.
 - Column B: Check box if person has no income (required).**
 - Column C & D –Gross monthly earnings 1(&2) before deductions:** List the **gross income** this person received last month. This is the persons total *employment income* for the *entire* month. It is not the same as take home pay. Gross income is the amount earned before taxes and deductions. It should be listed on your pay stub, or your supervisor can tell you.
 - Column E – Monthly Assistance:** List the total amount each person received last month from public assistance, child support, or alimony.
 - Column F – Monthly Payments:** List the total amount each person received last month from pensions, retirement, Social Security.
 - Column G – Any other monthly income:** Refer to chart below for income you are required to report.
- Box H - Complete the PFD information box. Incomplete applications cannot be approved.**
- Number 5:** An adult household member must sign the form and list his or her Social Security Number, or mark the box if he or she doesn't have one.
- Number 6:** Answer this question if you choose to.

Income to Report

- Earned Income:** Wages/Salaries/Tips, Worker's Compensation, Strike Benefits, Unemployment Compensation, Net Income from self-owned business or farm
- Pensions/Retirement:** Pensions, Retirement Income, Veteran's Payment, Supplemental Security Benefit, Social Security
- Other Income:** Disability Benefits, Cash withdrawn from savings, Interest/Dividends, Income from Estates/Trusts/Investments, Regular Contributions from person not living in the household, Net Royalties/Annuities, Net Rental Income, Payments exceeding \$2000 from Native Corporations, Any other Income
- Public Assistance/Child Support/Alimony:** Public Assistance Payments, Child Support Payments, Alimony

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