



## Bellefonte Area School District

318 North Allegheny Street  
Bellefonte, PA 16823  
Telephone: (814) 355-4814

Mrs. Tammie L. Burnaford, Superintendent  
Dr. Kristopher Vancas, Director of Curriculum and Instruction  
Mr. Kenneth G. Bean, Jr., CMA, Director of Fiscal Affairs

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Dear Parent or Guardian:

We are pleased to inform you that Bellefonte Area School District will be implementing the Seamless Summer Option (SSO) in the 2021-2022 school year. This program is available to schools and districts that are participating in the National School Lunch and School Breakfast Programs.

All enrolled students of Bellefonte Area School District are eligible to receive a nutritional breakfast and lunch each school day at **no charge** to your household.

Although no further action is required for your child(ren) to receive breakfast and lunch at no charge, the District is still encouraging families to fill out the Free and Reduced Applications as there are many other benefits that come along with it. You can apply on-line at [schoolcafe.com](https://schoolcafe.com) or visit the District website at [www.basd.net](https://www.basd.net) for a paper application.

If we can be of any further assistance, please contact Mrs. Laura Frye at [lfrye@basd.net](mailto:lfrye@basd.net) or Mrs. Misty Rider at [mrider@basd.net](mailto:mrider@basd.net).

Mrs. Laura Frye  
Director of Food Service

# Bellefonte Area School District

Dear Parent/Guardian:

Children need healthy meals to learn. **Bellefonte Area School District** offers healthy meals every school day. Breakfast costs **\$0.00**; lunch costs **\$0.00**. **Your child(ren) may qualify for free meals or for reduced-price meals.** Reduced-price is **\$1.00** for breakfast and **\$1.00** for lunch. This packet includes an application for free and reduced-price meal benefits, and a set of detailed instructions. Below are some common questions and answers to help with the application process.

If you have received a **NOTICE OF DIRECT CERTIFICATION** letter for free meals, **do not** complete the application. But **do** let the school know if any children in your household are not listed on the **NOTICE OF DIRECT CERTIFICATION** letter received.

1. WHO CAN GET FREE OR REDUCED-PRICE MEALS OR SPECIAL MILK?
  - All children in households receiving Supplemental Nutrition Assistance Program (SNAP) (formerly the Food Stamp Program) or Temporary Assistance for Needy Families (TANF) benefits are eligible for free meals.
  - Foster children who are under the legal responsibility of a foster care agency or court are eligible for free meals.
  - Children participating in their school's Head Start program are eligible for free meals.
  - Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
  - Children may receive free or reduced-price meals if your household's income is within the limits on the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced-price meals if your household income falls at or below the limits on this chart.

Income Eligibility Reduced-Price Guidelines—July 1, 2021–June 30, 2022					
Family Size	Annually	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	\$23,828	1,986	993	917	459
2	32,227	2,686	1,343	1,240	620
3	40,626	3,386	1,693	1,563	782
4	49,025	4,086	2,043	1,886	943
5	57,424	4,786	2,393	2,209	1,105
6	65,823	5,486	2,743	2,532	1,266
7	74,222	6,186	3,093	2,855	1,428
8	82,621	6,886	3,443	3,178	1,589
For each additional family member add:					
	8,399	700	350	324	162

2. HOW DO I KNOW IF MY CHILDREN QUALIFY AS HOMELESS, MIGRANT, OR RUNAWAY? Do the members of your household lack a permanent address? Are you staying together in a shelter, hotel, or other temporary housing arrangement? Does your family relocate on a seasonal basis? Are any children living with you who have chosen to leave their prior family or household? If you believe children in your household meet these descriptions and have not been told your children will get free meals, call or email **Mr. Daniel Park at 814-355-2812 or email [dpark@basd.net](mailto:dpark@basd.net)**.
3. DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD? No. *Use one Free and Reduced-Price School Meals Application for all students in your household.* An application that is not complete cannot be approved, so be sure to fill out all required information. Return the completed application to: **Mrs. Misty Rider, Accounting Manager, 318 North Allegheny Street, Bellefonte, PA 16823, 814-355-4814 or email [mrider@basd.net](mailto:mrider@basd.net)**
4. SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE MEALS? No, but read the letter you received carefully and follow the instructions. If any children in your household were missing from your eligibility notification letter, contact **Mrs. Misty Rider, Accounting Manager, 318 North Allegheny Street, Bellefonte, PA 16823, 814-355-4814, or email [mrider@basd.net](mailto:mrider@basd.net)** immediately.
5. CAN I APPLY ONLINE? Yes! You are encouraged to complete an online application instead of a paper application if you are able. The online application has the same requirements and will ask you for the same information as the paper application. Visit **[www.schoolcafe.com](http://www.schoolcafe.com)** or the PA Department of Human Services website at **[www.compass.state.pa.us](http://www.compass.state.pa.us)**.
6. MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT A NEW ONE? Yes. Your child's application is only good for that school year and for the first 30 operating school days of this school year. You must send in a new application unless the school told you that your child is eligible for the new school year.

7. I GET WIC. CAN MY CHILDREN GET FREE MEALS? Children in households participating in WIC may be eligible for free or reduced-price meals. Send in an application.
8. WILL THE INFORMATION I GIVE BE CHECKED? Yes. We may also ask you to send written proof of the household income you report.
9. IF I DON'T QUALIFY NOW, MAY I APPLY LATER? Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and/or reduced-price meals if the household income drops below the income limit.
10. 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: **Mr. Kenneth G. Bean, Jr., Director of Fiscal Affairs, 318 North Allegheny Street, Bellefonte, PA 16823, 814-355-4814 or email kbean@basd.net.**
11. 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.
12. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you normally receive. For example, if you normally make \$1,000 each month, but you missed some work last month and only made \$900, put down that you made \$1,000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
13. WHAT IF SOME HOUSEHOLD MEMBERS HAVE NO INCOME TO REPORT? Household members may not receive some types of income we ask you to report on the application, or may not receive income at all. Whenever this happens, write a 0 in the field. However, if any income fields are left empty or blank, those will also be counted as zeroes. Be careful when leaving income fields blank, as we will assume you meant to do so.
14. WE ARE IN THE MILITARY. DO WE REPORT OUR INCOME DIFFERENTLY? Your basic pay and cash bonuses must be reported as income. If you get any cash value allowances for off-base housing, food, or clothing, or receive Family Subsistence Supplemental Allowance payments, it must also be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. Any additional combat pay resulting from deployment is also excluded from income.
15. WHAT IF THERE ISN'T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY? List any additional household members on a separate piece of paper and attach it to your application. Contact **Mrs. Misty Rider, Accounting Manager, 318 North Allegheny Street, Bellefonte, PA 16823, 814-355-4814 or email mrider@basd.net.** to receive a second application.
16. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for **SNAP** or other assistance benefits, visit [www.compass.state.pa.us](http://www.compass.state.pa.us), contact your local county assistance office, or call 1-800-692-7462.

If you have other questions or need help, call **814-355-4814**.

Sincerely,

**Mrs. Misty Rider, Accounting Manager**

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, disability, 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 (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](https://www.usda.gov/oascr/how-to-file-a-program-discrimination-complaint), (AD-3027) found online at, <https://www.usda.gov/oascr/how-to-file-a-program-discrimination-complaint>, 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.

ATTENTION: If you speak Spanish, language assistance services, free of charge, are available to you. Contact your child's school.  
ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Comuníquese con la escuela de su niño.



# HOW TO APPLY FOR FREE AND REDUCED-PRICE SCHOOL MEALS or SPECIAL MILK PROGRAM

Use these instructions to help fill out the application for free or reduced-price school meals. Submit only one application per household, even if your children attend more than one school in Bellefonte Area School District. The application must be filled out completely to certify your children for free or reduced-price school meals. Follow these instructions in order! Each step of the instructions is the same as the steps on the application. If at any time you are not sure what to do next, contact Mrs. Misty Rider, 814-355-4814 or email [mrider@basd.net](mailto:mrider@basd.net).

**USE A PEN (NOT PENCIL) WHEN FILLING OUT THE APPLICATION AND DO YOUR BEST TO PRINT CLEARLY.**

## STEP 1: LIST ALL HOUSEHOLD MEMBERS WHO ARE INFANTS, CHILDREN, AND STUDENTS UP TO AND INCLUDING GRADE 12

Tell us how many infants, children, and school students live in your household. They do NOT have to be related to you to be a part of your household.

**Who should I list here?** When filling out this section, include ALL members in your household who are:

- Children age 18 or under AND are supported with the household's income;
- In your care under a foster arrangement, or qualify as homeless, migrant, or runaway youth;
- Students attending Bellefonte Area School District, regardless of age.

**A) List each child's name.** Print each child's name. Use one line of the application for each child. When printing names, write one letter in each box. Stop if you run out of space. If there are more children present than lines on the application, attach a second piece of paper with all required information for the additional children.

**B) Is the child a student at Bellefonte Area School District?** Mark 'Yes' or 'No' under the column titled "**Student**" to tell us which children attend Bellefonte Area School District. If you marked 'Yes,' write the grade level of the student in the '**Grade**' column to the left.

**C) Do you have any foster children?** If any children listed are foster children, mark the "**Foster Child**" box next to the child's name. If you are ONLY applying for foster children, after finishing **STEP 1**, go to **STEP 4**.  
Foster children who live with you may count as members of your household and should be listed on your application. If you are applying for both foster and non-foster children, go to step 3.

**D) Are any children homeless, migrant, or runaway?** If you believe any child listed in this section meets this description, mark the "**Homeless, Migrant, Runaway**" box next to the child's name and complete all steps of the application.

## STEP 2: DO ANY HOUSEHOLD MEMBERS CURRENTLY PARTICIPATE IN SNAP or TANF?

**If anyone in your household (including you) currently participates in one or more of the assistance programs listed below, your children are eligible for free school meals:**

- The Supplemental Nutrition Assistance Program (SNAP).
- The Temporary Assistance for Needy Families (TANF).

**A) If no one in your household participates in any of the above listed programs:**

- Leave **STEP 2** blank and go to **STEP 3**.

**B) If anyone in your household participates in any of the above listed programs:**

- Write a case number for SNAP or TANF. You only need to provide one case number. If you participate in one of these programs and do not know your case number, contact: 1-877-395-8930 or your local assistance office.
- Go to **STEP 4**.

## STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

**How do I report my income?**

- Use the charts titled "**Sources of Income for Adults**" and "**Sources of Income for Children**" printed on the back side of the application form to determine if your household has income to report.
- Report all amounts in GROSS INCOME ONLY. Report all income in whole dollars. Do not include cents.
  - Gross income is the total income received before taxes.
  - Many people think of income as the amount they "take home" and not the total "gross" amount. Make sure that the income you report on this application has NOT been reduced to pay for taxes, insurance premiums, or any other amounts taken from your pay.

- Write a “0” in any fields where there is no income to report. Any income fields left empty or blank will also be counted as a zero. If you write ‘0’ or leave any fields blank, you are certifying (promising) that there is no income to report. If local officials suspect that your household income was reported incorrectly, your application will be investigated.
- Mark how often each type of income is received, using the check boxes to the right of each field.

### 3.A. REPORT INCOME EARNED BY CHILDREN

**A) Report all income earned or received by children.** Report the combined gross income for ALL children listed in STEP 1 in your household in the box marked “Child Income.” Only count foster children’s income if you are applying for them together with the rest of your household.

**What is Child Income?** Child income is money received from outside your household that is paid DIRECTLY to your children. Many households do not have any child income.

### 3.B. REPORT INCOME EARNED BY ADULTS

**Who should I list here?**

- When filling out this section, include ALL adult members in your household who are living with you and share income and expenses, even if they are not related and even if they do not receive income of their own.
- **Do NOT include:**
  - People who live with you but are not supported by your household’s income AND do not contribute income to your household.
  - Infants, Children, and Students already listed in **STEP 1.**

<b>B) List adult household members’ names.</b> Print the name of each household member in the boxes marked “Names of Adult Household Members (First and Last).” <u>Do not list any household members you listed in STEP 1.</u> If a child listed in <b>STEP 1</b> has income, follow the instructions in <b>STEP 3, part A.</b>	<b>C) Report earnings from work.</b> Report all income from work in the “Earnings from Work” field on the application. This is usually the money received from working at jobs. If you are a self-employed business or farm owner, you will report your net income.  <b>What if I am self-employed?</b> Report income from that work as a net amount. This is calculated by subtracting the total operating expenses of your business from its gross receipts or revenue.	<b>D) Report income from public assistance/child support/alimony.</b> Report all income that applies in the “Public Assistance/ Child Support/Alimony” field on the application. <u>Do not report the cash value of any public assistance benefits NOT listed on the chart.</u> If income is received from child support or alimony, only report court-ordered payments. Informal but regular payments should be reported as “other” income in the next part.
<b>E) Report income from pensions/retirement/all other income.</b> Report all income that applies in the “Pensions/ Retirement/All Other Income” field on the application.	<b>F) Report total household size.</b> Enter the total number of household members in the field “Total Household Members (Children and Adults)”. This number <b>MUST</b> be equal to the number of household members listed in <b>STEP 1</b> and <b>STEP 3</b> . If there are any members of your household that you have not listed on the application, go back and add them. It is very important to list all household members, as the size of your household affects your eligibility for free and reduced-price meals.	<b>G) Provide the last four digits of your Social Security Number.</b> An adult household member must enter the last four digits of their Social Security Number in the space provided. You are eligible to apply for benefits even if you do not have a Social Security Number. If no adult household members have a Social Security Number, leave this space blank and mark the box to the right labeled “Check if no SSN.”

## STEP 4: CONTACT INFORMATION AND ADULT SIGNATURE

**All applications must be signed by an adult member of the household. By signing the application, that household member is promising that all information has been truthfully and completely reported. Before completing this section, also make sure you have read the privacy and civil rights statements on the back of the application.**

<b>A) Provide your contact information.</b> Write your current address in the fields provided if this information is available. If you have no permanent address, this does not make your children ineligible for free or reduced-price school meals. Sharing a phone number, email address, or both is optional, but helps us reach you quickly if we need to contact you.	<b>B) Print and sign your name.</b> Print the name of the adult signing the application and that person signs in the box “Signature of adult.”	<b>C) Write today’s date.</b> In the space provided, write today’s date in the box.	<b>D) Share children’s racial and ethnic identities (optional).</b> On the back of the application, we ask you to share information about your children’s race and ethnicity. This field is optional and does not affect your children’s eligibility for free or reduced-price school meals.
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## INSTRUCTIONS Sources of Income

Sources of Income for Children	
Sources of Child Income	Example(s)
- Earnings from work	- A child has a regular full or part-time job where they earn a salary or wages
- Social Security <ul style="list-style-type: none"> <li>Disability Payments</li> <li>Survivor's Benefits</li> </ul>	- A child is blind or disabled and receives Social Security benefits - A parent is disabled, retired, or deceased, and their child receives Social Security benefits
- Income from person outside the household	- A friend or extended family member regularly gives a child spending money
- Income from any other source	- A child receives regular income from a private pension fund, annuity, or trust

Sources of Income for Adults		
Earnings from Work	Public Assistance / Alimony / Child Support	Pensions / Retirement / All Other Income
- Gross Salary, wages, cash bonuses - Net income from self-employment (farm or business) <b>* Reporting Annual Income is allowable for seasonal or self-employment</b> If you are in the U.S. Military: - Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances) - Allowances for off-base housing, food, and clothing	- Unemployment benefits - Worker's compensation - Supplemental Security Income (SSI) - Cash assistance from State or local government - Alimony payments - Child support payments - Veteran's benefits - Strike benefits	- Social Security (including railroad retirement and black lung benefits) - Private pensions or disability benefits - Regular income from trusts or estates - Annuities - Investment income - Earned interest - Rental income - Regular cash payments from outside household

## 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

Race (check one or more): ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White

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.

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, disability, 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 (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](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:

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

fax: (202) 690-7442; or  
email: [program.intake@usda.gov](mailto:program.intake@usda.gov).

This institution is an equal opportunity provider.

**\* All Household Applications must be returned to your child's school for processing.**

## Do not fill out For School Use Only

Annual Income Conversion: Weekly x 52, Every 2 Weeks x 26, Twice A Month x 24, Monthly x 12

Total Income: \_\_\_\_\_ Per : ☐ Week, ☐ Every 2 Weeks, ☐ Twice A Month, ☐ Monthly, ☐ Yearly, Household Size: \_\_\_\_\_ Date Withdrawn: \_\_\_\_\_

Eligibility: ☐ Free ☐ Reduced ☐ Denied Reason: \_\_\_\_\_ ☐ Categorically Eligible ☐ Other Source Categorically Eligible Determining Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Confirming Official's Signature (cannot be the Determining Official): \_\_\_\_\_ Date: \_\_\_\_\_ Signature of School Employee Completing Verification: \_\_\_\_\_ Date: \_\_\_\_\_



# Bellefonte Area School District

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Mrs. Tammie L. Burnaford, Superintendent  
Dr. Kristopher Vancas, Director of Curriculum and Instruction  
Mr. Kenneth G. Bean, Jr., CMA, Director of Fiscal Affairs

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Summer 2021

Bellefonte Area School District is excited to continue with **schoolcafe**, a convenient, easy and free online service to access your child's meal account, make payments, and view account balance. Please access **[www.schoolcafe.com](http://www.schoolcafe.com)**, to register your children's account. If you took advantage of school café last year, your account is already active and there is no need to register again.

### **Important to Know:**

While this website is free to use, if you wish to utilize the online payment option, a convenience fee of 5% per deposit transaction will be assessed. Parents placing money into multiple meal accounts will only be charged one fee per deposit transaction. For example, a deposit of \$20.00 would have a 5% fee of \$1.00. The total amount applied to student's cafeteria account would be \$20.00. The Bellefonte Area School District does not profit from the use of this site.

Please allow up to one day for transactions to be applied to your child's cafeteria account.

You do not have to utilize the online payment feature of this website to access the other features of this website.

Direct Payment Plans, checks, and cash are still options for depositing money into your child's cafeteria account and are completely free to use.

Also, for your convenience, the Bellefonte Area School District is happy to announce that applying for free and reduced lunch eligibility can also be completed online at **[www.schoolcafe.com](http://www.schoolcafe.com)**. This will allow families to receive the program's benefits faster than the traditional paper application and is also a completely free service.

**For the 2021-2022 school year, the USDA has approved students to receive one full Breakfast Meal and one full Lunch Meal per day at no charge. A "full meal" includes the entrée, the designated number of side dishes, and a milk. If a student chooses less than a "full meal", the student is charged the a la carte price for the item(s) selected. Students who choose to take just a milk will be charged \$0.60.**

In order for new users, to take advantage of the above services, your child's student id/lunch pin # will be needed. If you are unsure of your child's pin number or for more information about the above services, please contact Mrs. Misty Rider ext. 3013, [mrider@basd.net](mailto:mrider@basd.net). Enjoy the Summer!

**All food service information can be found at the district's website [WWW.BASD.NET](http://WWW.BASD.NET)**



# schoolcafé

## QUICK CARD






**Contact Info:** (Note: For security purposes, you may be asked to verify your contact info, including your security answer, when you request help.)

**Phone:** 855.PAY-2-EAT - (855) 729-2328

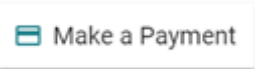




**Email:** [customer@schoolcafe.com](mailto:customer@schoolcafe.com)

**Website:** <https://www.schoolcafe.com>

### REGISTRATION

1. Select 
2. Select *I'm a Parent* and select 
3. Enter your name and contact information, and then select 
4. Create a username and password you will easily remember, and confirm the password
5. Set up a security question and answer (in case you do forget your login credentials) and select 
6. Read and accept the Terms & Conditions, and then select 




### MAKE A PAYMENT

1. At the top of your Dashboard, select 
2. Enter payment dollar amounts for each student as desired and select 
3. (Optional) If your district allows for purchasing of other types of school items (yearbooks, fees, etc.), you will see a  button, where you can enter payment amounts for those items as well. If the district does not accept those kinds of payments through SchoolCafé, this button will not be visible.
4. On the Checkout screen, confirm the total and select an existing payment method, or choose  to add a new card.
  - a. When adding a new card, you can enter your card's details and either save the card (even making it your default payment card) or simply use it for a one-time payment.
5. When you have confirmed all details, select  to complete the payment. Funds are typically available at the child(ren)'s school(s) within 20 minutes.







## SET UP AUTOMATIC PAYMENTS

1. From your Dashboard, locate an individual student on your account and select the blue text next to 'Automatic Payment' (the text will say either 'Not Set' or 'Set for ...')  Automatic Payment: **Not Set**
2. In the first field, enter a Payment Amount. This amount will be paid automatically.
3. In the next field, enter a balance threshold. This tells SchoolCafé how low the student's balance must be before the payment will be made.
4. Select a payment source or select  [Add a Card](#) to add a new card.
5. In the last field, confirm the date that the Automatic Payment will expire. (Note: this date should be before your payment source expires, if possible!)
6. Select 

## SET UP LOW BALANCE ALERTS

1. From your Dashboard, locate an individual student and select the blue text next to 'Low Balance Alert' (the text will say either 'Not Set' or 'Set for ...')  Low Balance Alert: **Not Set**
2. In the first field, enter a balance threshold. This tells SchoolCafé how low the student's balance must be before a low balance alert is sent to you.
3. In the next field, enter how often you would like to receive a reminder that the student's balance is below the threshold. This is helpful in case you miss an email or alert.
4. Select 

For answers to frequently asked questions, and to get the most up-to-date help with this or any other information not covered here, please visit our website at <https://www.schoolcafe.com> and select



FAQs

# schoolcafé

## Quick Card

1

schoolcafé

Dashboard

Payments & Purchases

Eligibility Benefits

Apply

My Applications

Eligibility Notifications

Menus & Nutrition

Support

Welcome, Bob (HANCOCK COUNTY SCHOOLS)

Select Language

English

中文

Select from Various Languages

Apply for Free & Reduced Meals

Add a Student

ID

Date of Birth

First Name

Middle Name

Last Name

School

Is this student a Foster, Homeless, Migrant, Runaway, Head Start child?

Yes No

Was this student approved for a PFD?

Yes No

Does this student receive income?

Yes No

To ensure that we can match your students, please enter as many details as possible.

Cancel

Add this Student

Add Details: such as Income, or if your Student is Foster or Homeless

Eligibility Benefits

Apply

My Applications

Eligibility Notifications

Menus & Nutrition

My Account

Polls (0)

Support

Logout

Certify

Please provide honest acknowledgement of the terms and conditions for this application before proceeding.

Bob Smith

4422 Cypress Creek Pkwy Suite 400

Houston, TX 12345

123-456-7899

test@test.com

Edit

I certify (provide true and that I understand the information provided is correct)

☐ I understand that school officials may verify (check) the information provided. I understand that if I purposely give false information, my children will lose benefits, and I may be prosecuted.

\* required

Previous

Next

Click to Certify your Information is Correct

Edit Application Information

Students

Enter all K-12 students in your household

Add a Student

You do not have any students associated with your SchoolCafé account. You need to add at least one student.

Previous

Next

Add Students to your Application

# schoolcafé

## Quick Card

Students Already Added will  
Populate and can be Selected here

4

Select students from your SchoolCafé account

Please select any students you have already added to your account and answer a few basic questions in order to speed up the application process!

- ☐ Jane Kaye Smith
- ☐ Sean Michael Smith

Select Students  
Already Added

Are there any other students in your household?

☐ Yes ☐ No

Do any of the students in your household receive income?

☐ Yes ☐ No

Are any of these students Foster, Homeless, Migrant, Rural, or Native American?

☐ Yes ☐ No

Do you receive any assistance from SNAP, TANF, or FDIPIR?

☐ Yes ☐ No

Answer Questions  
about your Household

5

Assistance

Do you receive any assistance from SNAP, TANF, or FDIPIR?

☐ Yes ☒ No

Previous

English

Add Information about the  
Financial Assistance  
you Receive in the Assistance  
Step

Assistance

Do you receive any assistance from SNAP, TANF, or FDIPIR?

☒ Yes ☐ No

Benefits Received

\* required

What type of benefits do you receive?

☐ FDIPIR ☐ SNAP ☐ TANF

Previous

Use of Information Statement | Non-Discrimination Statement

What is your case number?

Case Number

1234567890

Enter Information such as  
Case Number

What is your case number?

Case Number

123456789|

Case number must be 10 digits.

Number of Digits is Validated  
to Ensure Accuracy

2

Return to a Previous  
Step in your Application

6

English

Students

Assistance

Household

Review

Submit

Household

Please list all household members and any income they may receive below so that we can determine your household size/income. To speed things up we've already added your students that you entered earlier.

Add Household Member

Add Additional  
Household Members

(student)  
Income: None

(student)  
Income: None

Smith, Bob (applicant)  
Income: \$3,000.00 (Monthly)

Previous

Next

Adjust Income  
if Needed

# schoolcafé

## Quick Card

7

Students Assistance Household **Review** Submit

### Review

Glance over your information and make sure everything looks good. If something needs to be changed you can select the edit option for each section. Otherwise, you can proceed to the next step.

#### Students

Go Back to Students

You have indicated that your household contains 2 K-12 student(s).

Income: None  
Foster/Homeless/Migrant/Runaway/Head Start: No

Income: None  
Foster/Homeless/Migrant/Runaway/Head Start: No

#### Assistance

Go Back to Assistance

You have indicated that you did not receive any assistance from SNAP, TANF, or FDIPIR.

#### Household

Go Back to Household

Total Household Size (Including Children and Adults): 3

(student)  
Income: None

(student)  
Income: None

Smith, Bob (applicant)  
Income: \$3,000.00 (Monthly)

Previous

Review your Application Information

Selected Students for Application

Household Information

8

Students Assistance Household Review **Submit**

### Submit

Bob Smith

Before submitting, please fill in a few details about yourself. This information will not be shared but helps the food service office contact you with the results of your application.

An adult household member must electronically sign the application. If the household member inform section is not completed, an adult signing this application should have a social security number or mark the "I do not have a SSN"

to capture the last 4 digits of your social security number for applying. If you do not have a social security number, you may indicate that below.

Do you have an SSN?

☒ Yes ☐ No

Enter the last 4 digit of your Social Security Number  
1234

Enter the Last Four Digits of your SSN (if required)

Digitally Sign your Online Application

Submit your Application

Bob Smith

Your application was successfully verified and signed via IP Address 10.10.100.91.

Submit My Application

Return to Previous Steps to Adjust Any Information

9

### Summary

You have successfully completed your online application!

Your application number is 5. You can find the details of your information on the My Applications page. When processing is completed, you will receive a letter officially notifying you of the results from your district. Those results will be available on the Eligibility Notifications page.

Copy of your application

2017 - 2018 Application for Free and Reduced Price Meal									
STEP 1 - All Children to the Household: Complete one application per household. Please use a pen (not a pencil).									
Student ID	Last Name	First Name	MI	DOB	Student?	SCHOOL Code	Grade	Direct Approve	
100081					<input type="checkbox"/>				
100732					<input type="checkbox"/>				
STEP 2 - Assistance Programs: Do any household members (including you) currently participate in SNAP? If you answered NO - Complete STEP 2. If you answered YES - Please add SNAP number here (up to STEP 4).									
Add Case Number or SNAP Identifier (not the EBT ID):									
STEP 3 - Household Member Income (Skip this step if you answered 'Yes' in STEP 2): Please note: How to apply for Free and Reduced Price School Meals for more information. The "Statement of Income for Children" section will help you with the child income section. The "Statement of Income for Adult" section will help you with the Adult household member section.									
List all household members not listed in Step 1 (including yourself) even if they do not receive income. For each household member listed, report total income for each source in whole dollars only. If they do not receive income from any source, write "0". If you write "0" or leave any field blank, you are certifying (promising) that there is no income to report.									
Household Member (First and Last Name)	Earnings from Work	How Often?	Public Assistance / Child Support / Alimony	How Often?	Pensions / Retirement / All Other Income	How Often?			
Bob Smith	\$3,000.00 Monthly								
Total Household Size		Last Four Digits of Social Security Number (SSN) of Primary Wage Earner or Another Adult Household Member		SSN: 1234		Check if no SSN: <input type="checkbox"/>			
STEP 4 - Contact Information and Adult Signature: I hereby certify that all information on this application is true and that all income is reported. I understand that this information is given in confidence with the intent of Federal, State, and local officials may verify this information. I am aware that if I knowingly give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws.									
Printed name of adult completing the form		Signature of adult completing the form				Today's Date			
Bob Smith		[Signature]				01/12/17			
Street Address (if available)		City		State		ZIP Code			
870 Easy St		Palmer		MA		12345			
Home Phone Number		Work Phone Number		Email					
2143567890				bobsmith@primerededge.com					
Optional - Children's Racial and Ethnic Identifiers									
Ethnicity: Race:									

After Submitting, you'll Receive an Application Copy

Print or Download a Copy of your Application

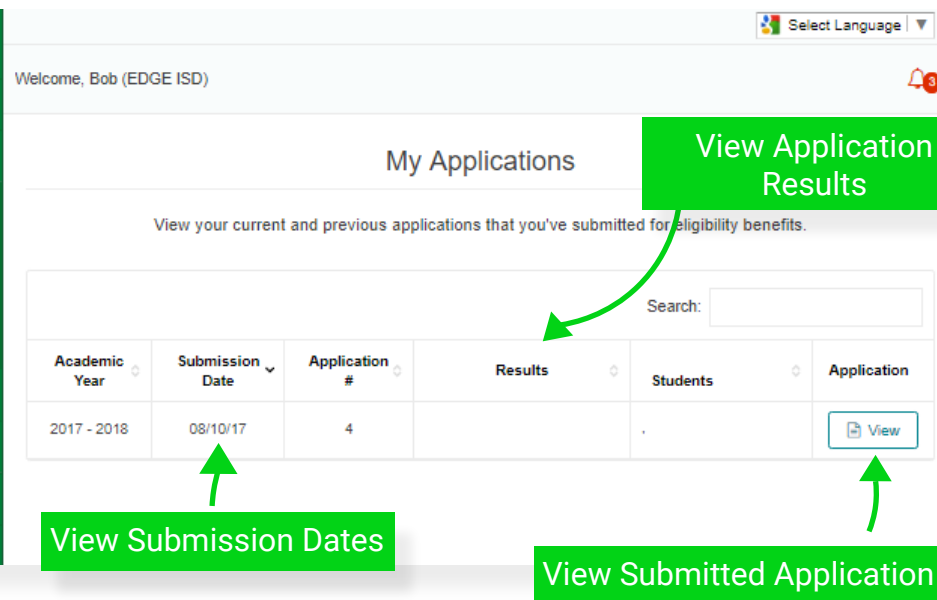
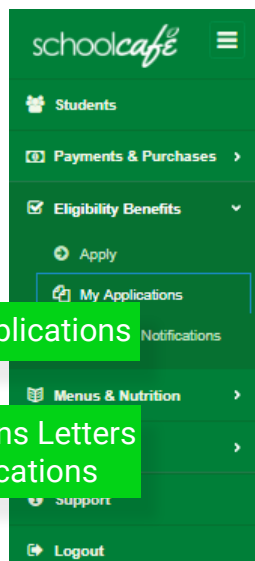
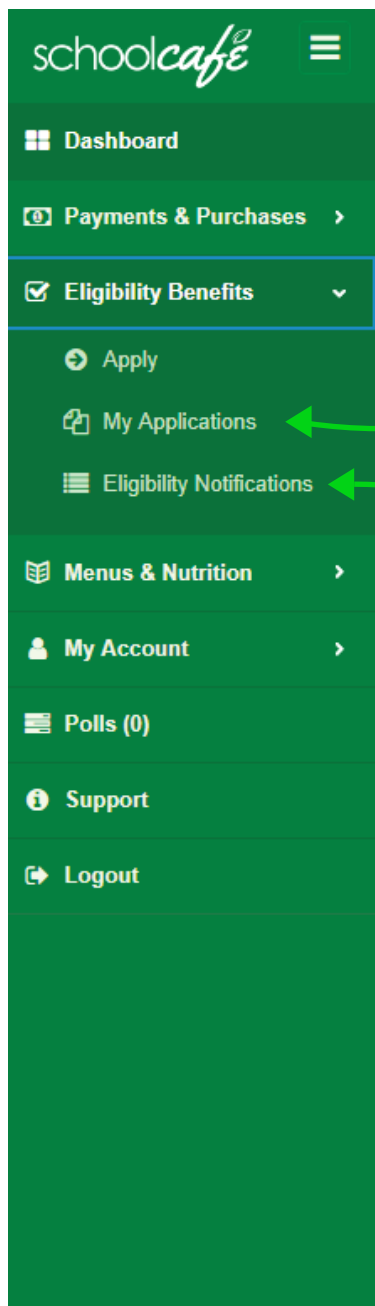
Print Download

I need to apply for more students. Start another application.

# schoolcafé

## Quick Card

4



The 'My Applications' page shows a welcome message 'Welcome, Bob (EDGE ISD)' and a notification bell with '3'. Below the title 'My Applications' is the instruction 'View your current and previous applications that you've submitted for eligibility benefits.' There is a search bar. A table lists applications with columns: Academic Year, Submission Date, Application #, Results, Students, and Application. One application is shown for the 2017-2018 year, submitted on 08/10/17, with application number 4. A 'View' button is next to it. A 'Select Language' dropdown is in the top right.

Academic Year	Submission Date	Application #	Results	Students	Application
2017 - 2018	08/10/17	4		.	<a href="#">View</a>

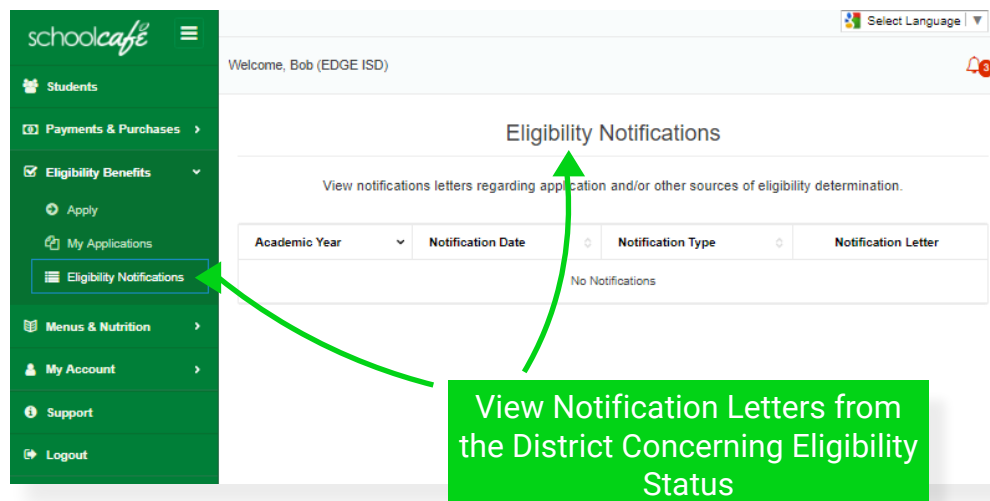
View Previous Applications

View Notifications Letters Regarding Applications

View Submission Dates

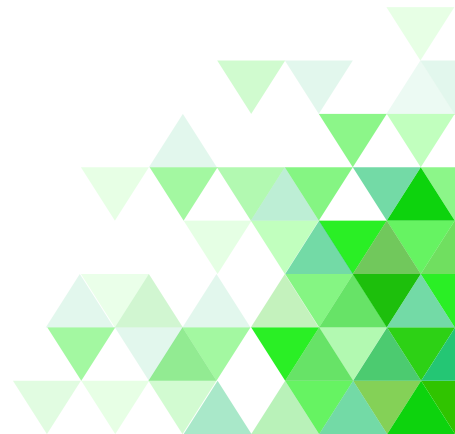
View Application Results

View Submitted Application



The 'Eligibility Notifications' page shows a welcome message 'Welcome, Bob (EDGE ISD)' and a notification bell with '3'. Below the title 'Eligibility Notifications' is the instruction 'View notifications letters regarding application and/or other sources of eligibility determination.' There are filters for Academic Year, Notification Date, Notification Type, and Notification Letter. The page shows 'No Notifications'.

View Notification Letters from the District Concerning Eligibility Status





## Bellefonte Area School District

318 North Allegheny Street

Bellefonte, PA 16823

Telephone: (814) 355-4814

Mrs. Tammie L. Burnaford, Superintendent

Dr. Kristopher Vancas, Director of Curriculum and Instruction

Mr. Kenneth G. Bean, Jr., CMA, Director of Fiscal Affairs

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### ***LOW COST STUDENT ACCIDENT INSURANCE AVAILABLE***

Dear Parents or Guardian,

**The Bellefonte Area School District provides accident insurance for student athletes, but it does not carry medical insurance on students outside of athletics.** The School District does provide you with the opportunity to purchase an Accident Insurance Plan through Zurich Insurance Company, an A+ rated company. Due to an injury from an accident, this \$500,000. Maximum Benefit applies after your other insurance, if any, is exhausted. Coverage includes:

#### Hospital Services

Hospital Room and Board	Usual & Customary Charge
Ancillary or Miscellaneous Inpatient Hospital	\$5,000.
Medical Emergency Care	\$100.
Outpatient Surgical Room	\$1,000.
Outpatient Diagnostic X-Rays and laboratory Tests	\$750.

#### Doctor's Services

Physician's Surgical Procedures	\$5,000.
Anesthesiologist	30% of Surgery
Physician's Non-Surgical Treatment	\$250.

#### Additional Services

Registered Nurse	\$375.
Physiotherapy	\$500; Max-10 Visits
Non-Emergency Inpatient/Outpatient X-Rays	\$200.
Diagnostic Imaging	\$750.
Ambulance Expenses	\$1,000.
Medical Equipment Rental	\$2,500.
Eyeglasses, Contacts or Hearing Aids	\$1,000.
Prescription Drugs	Usual & Customary Charge
Accident Dental	\$4,000.

#### Rates

School Time Only	\$ 30.
24 Hour Coverage	\$113.

**Limitations and exclusions do apply to these coverages.** Please refer to the policy and application for coverage details. If you would like to obtain more information or purchase the coverage, please log on to [www.BollingerSchools.com](http://www.BollingerSchools.com).





# PreK-12 Voluntary Student Accident Insurance

## AVAILABLE COVERAGE OPTIONS

Depending on which program your school provides, some or all of the following voluntary insurance products are available for purchase on a voluntary basis:

- School time only student accident insurance
- 24-hour accident coverage
- Student dental accident insurance

## KIDS WILL BE KIDS

1. Make sure your child is properly covered against unforeseen accidents.
2. Purchase coverage at your convenience from any computer.
3. Follow the easy step-by-step instructions and you're done in minutes!



These voluntary participation student accident insurance plans offered through your school can be purchased easily online at:

**[www.BollingerSchools.com](http://www.BollingerSchools.com)**

## OFFICE LOCATION

200 Jefferson Park, Whippany, NJ 07981

**[BollingerSchools.com](http://BollingerSchools.com)**



The information contained herein is offered as insurance industry guidance and provided as an overview of current market risks and available coverages and is intended for discussion purposes only. This publication is not intended to offer legal advice or client-specific risk management advice. Any description of insurance coverages is not meant to interpret specific coverages that your company may already have in place or that may be generally available. General insurance descriptions contained herein do not include complete insurance policy definitions, terms and/or conditions, and should not be relied on for coverage interpretation. Actual insurance policies must always be consulted for full coverage details and analysis. DBA Risk Placement Services Insurance Brokers. CA License No. 0C66724. Copyright © 2020 Risk Placement Services, Inc.



## High-quality health care coverage from CHIP helps keep kids strong

### CHIP COVERS

- Routine check-ups
- Prescriptions
- Hospitalization
- Dental
- Eye Care
- Eyeglasses
- Behavioral care
- Specialty care
- More

CHIP covers uninsured kids up to age 19 in Pennsylvania. It doesn't matter why your kids don't have health coverage right now; CHIP may be able to help. Most kids receive CHIP for free. Others can get the same benefits at a low cost.

CHIP is brought to you by leading health insurance companies who offer quality, comprehensive coverage.

There is no limit on income. If your income is below CHIP guidelines, your child may be enrolled in Medical Assistance.

**APPLY/RENEW**

CHIPcoversPAkids.com • 800-986-KIDS



Pennsylvania's Children's  
Health Insurance Program  
**We Cover All Kids.**

# Bellefonte Area School District

## 2021-2022 School Calendar

July '21						
Su	M	Tu	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

August '21						
Su	M	Tu	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

September '21						
Su	M	Tu	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

October '21						
Su	M	Tu	W	Th	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

November '21						
Su	M	Tu	W	Th	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

December '21						
Su	M	Tu	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

End of MP 1: Nov. 3rd

January '22						
Su	M	Tu	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

February '22						
Su	M	Tu	W	Th	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28					

March '22						
Su	M	Tu	W	Th	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

End of MP 2: Jan. 24th

April '22						
Su	M	Tu	W	Th	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

May '22						
Su	M	Tu	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

June '22						
Su	M	Tu	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

End of MP 3: April 1st

<div style="display: flex; align-items: center;"> <div style="width: 20px; height: 10px; background-color: green; margin-right: 5px;"></div> <div>First and Last Day of School</div> </div> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 10px; background-color: yellow; margin-right: 5px;"></div> <div>Professional Learning Day (No school for students)</div> </div> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 10px; background-color: orange; margin-right: 5px;"></div> <div>Act 80 Day (No school for students)</div> </div> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 10px; background-color: purple; margin-right: 5px;"></div> <div>Clerical Day (No school for students)</div> </div> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 10px; background-color: red; margin-right: 5px;"></div> <div>School Closed/Holiday (No school for students)</div> </div> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 10px; background-color: blue; margin-right: 5px;"></div> <div>Vacation/Weather Makeup Day</div> </div>	<p>Graduation Date: Senior Awards Night:</p> <p>Parent/Teacher Conferences: November 8, 2021</p> <p>Snow days will be made up in the following order: March 10 and 11, 2022 (any additional days will be added to the end of the school year)</p> <p>Staff Opening Day (no students): August 16, 2021</p> <p>Staff Trade Day: May 27, 2022</p>
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Approved 2/23/21

# **2021-2022 School Calendar Description**

## **Marking Periods**

1<sup>st</sup> – November 3rd  
2<sup>nd</sup> – January 24th  
3<sup>rd</sup> – April 1st  
4<sup>th</sup> – June 9th

## **Calendar Description**

August 10 – 12 – New Teacher Induction  
August 16 – Staff Opening Day (ALL Support Staff must attend – no school for students)  
August 17 – Professional Learning Day (no school for students)  
August 18 – Professional Learning Day (no school for students)  
August 19 – Teacher Clerical Day (no school for students)  
**August 31 – First Student Day**  
September 3 – Vacation Day (no school for students)  
September 3 – 12-Month Support Staff Work Day  
September 6 – Holiday (Labor Day)  
October 15 – Act 80 Day (no school for students)  
November 8 – Staff Professional Learning – Parent/Teacher Conferences (no school for students)  
November 24 – 12-Month Support Staff Work Day  
November 24 – November 29 – Thanksgiving Vacation (no school for students)  
December 23 – 12-Month Support Staff Work Day  
December 23 – January 3 – Winter Vacation (no school for students)  
January 17 – Act 80 Day (Martin Luther King Day – no school for students)  
January 28 – Teacher Clerical Day (no school for students)  
February 18 – Act 80 Day (no school for students)  
February 21 – Holiday (Presidents' Day – no school for students)  
March 10, 11 – 12-Month Support Staff Work Days  
March 10, 11 – Snow Makeup Days  
April 14 – Act 80 Day (no school for students)  
April 15 – Spring Vacation (no school for students)  
April 18 – 12-Month Support Staff Work Day  
April 18 – Spring Vacation (no school for students)  
May 27 – Staff Professional Learning (no school for students)  
May 30 – Holiday (Memorial Day – no school for students)  
**June 9 – Last Student Day**  
June 10 – Teacher Clerical Day (no school for students)

## **Extended Tuesday Dates for 21-22**

Elementary: 9/7, 9/21, 10/5, 10/19, 11/9, 11/16, 12/7, 12/21, 1/4, 1/18, 2/1, 2/15, 3/1, 3/15, 4/5, 4/19, 5/3, 5/17

Secondary: 9/7, 10/5, 11/9, 12/7, 1/4, 2/1, 3/1, 4/5, 5/3

If school is cancelled on the designated Tuesday, the makeup date will be the following Tuesday.