

Community Eligibility Provision (CEP)

{ DAC
March 15, 2017

\$44,955

- ⌘ Federal Program
- ⌘ Universal Feeding Program – All students at the school eat free breakfast & lunch
- ⌘ Streamlined Process
 - ⌘ Automatically captures families getting other assistance
 - ⌘ Uses a multiplier to approximate others
- ⌘ Ability to group schools to maximize benefit

What is CEP?...Why CEP?

- ⌘ Because of the ability to group, 18 new schools are now providing free breakfast and lunch, effective March 1st
- ⌘ Helps families close to, but just above, the income cutoff
- ⌘ Expanding breakfast-in-the-classroom, nutrition breaks
- ⌘ Spreading the word....

New CEP Schools

93

Elementary Schools

- Birney
- Cadman
- Fletcher
- Florence
- Lafayette
- Lindbergh-Schweitzer
- Ocean Beach
- Penn Elementary
- Toler
- Walker
- Wegeforth
- Zamorano

Middle Schools

- CPMA

High Schools

- Kearny • Madison

Alternative Schools

- ALBA • Twain
- Trace

New CEP Schools

Elementary Schools

- Adam
- Audubon K-8
- Baker
- Balboa
- Bandini
- Boone
- Burbank
- Carson
- Carver
- Central
- Chavez
- Cherokee Point
- Chollas/Mead
- Clay
- Edison
- Emerson
- Encanto
- Euclid
- Fay
- Field
- Franklin
- Freese
- Fulton K-8
- Garfield
- Golden Hill K-8
- Hamilton
- Horton
- Ibarra
- Jefferson
- Johnson
- Joyner
- Kimbrough
- Lind Vista
- Logan K-8
- Marshall
- Normal Heights
- Oak Park
- Pacific View
- Leadership
- Paradise Hills
- Perkins K-8
- Porter North
- Porter South
- Rodriguez
- Rolando Park
- Rosa Parks
- Ross
- Rowan
- Sherman
- Valencia Park
- Washington
- Webster

Middle Schools

- Clark
- Mann
- Memorial
- Millennial Tech
- Montgomery
- Wilson
- Knox

High Schools

- Crawford
- East Village
- Garfield
- Hoover
- Lincoln
- San Diego

CDCs

- Bayview
- Brooklyn
- Col. Solomon
- Euclid
- Fletcher
- Kennedy
- Montezuma
- Walker
- Wegeforth

Alternative Sites

- Riley/New Dawn
- Marcy

Prov. II Schools
Now CEP

Elementary Schools

- Hawthorne
- Nye

Middle Schools

- Bell
- Roosevelt

High Schools

- Morse

Remaining Prov. II Schools

Elementary Schools

- Alcott
- Angier
- Barnard
- Bay Park
- Benchley-Weinberger
- Bethune
- Bird Rock
- Cabrillo
- Chesterton
- Crown Point
- Cubberly
- Curie
- Dailard
- Dewey
- Dingeman
- Doyle
- E.B. Scripps
- Ericson
- Foster
- Gage
- Grant
- Green
- Hage
- Hancock
- Hardy
- Hearst
- Hickman
- Holmes
- Jerabek
- Jones
- Juarez
- Kumeyaay
- La Jolla
- Language Academy
- Lewis
- Loma Portal
- Longfellow
- Marvin
- Mason
- McKinley
- Miller
- Miramar
- Pacific Beach
- Perry
- Salk
- Sandburg
- Sequoia
- Sessions
- Silver Gate
- Speckles
- Sunset View
- Tierrasanta
- Torrey Pines
- Vista Grande
- Whitman
- Whittier

Middle Schools

- Challenger
- Correia
- De Portola
- Farb
- Lewis
- Marshall
- Marston
- Muirlands
- Pacific Beach
- Pershing
- Standley
- Taft
- Wangenheim
- Innovation

High Schools

- Clairemont
- Henry
- La Jolla
- Mira Mesa
- Mission Bay
- Point Loma
- Scripps Ranch
- Serra
- University City

Atypical Schools

- SCPA

Alternative Sites

- Muir

Traditional Schools

61.9%

- ⌘ Drives LCFF Funding & Title I Allocation
- ⌘ Data collection depends on meal program
 - ⌘ Meal Applications
 - ⌘ LCFF Surveys
 - ⌘ Direct Certification
- ⌘ District team working to improve outreach
- ⌘ Represent our district as best we can

School Meal Eligibility – still
the key poverty measure



Local Control Funding Formula Data Collection 2016-2017

School Name: _____ Grade _____

Teacher: _____ Room _____ Period _____

Student Name: _____

OFFICE USE ONLY	
DISTRICT ID	LOC

MARKING INSTRUCTIONS

- Make solid marks that fill the response completely.
- Erase cleanly any marks you wish to change.
- Make no stray marks on this form.

CORRECT: ● INCORRECT: ☒ ⊗ ⊙

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This form helps ensure your child's school gets funding it deserves.
Your child will continue to receive free meals at this school. See detailed information on the back.

Fill out Part 1, then sign and date in Part 2.

PART 1: Count People Living in Home and Fill in Total Monthly Household Income

- 1) Count the number of people living in your home. Include children and adults.
- 2) Estimate the combined monthly income of all people living in your home.
- 3) Find the box below that matches the number of people living in your home.
- 4) In that box, fill in the bubble above the range that matches the combined monthly income of all people living in your home. Fill in only one bubble.

Alternatively, write the number of people living in your home and total monthly household income below.

Number of People Living in Home (adults and children): _____ Total Monthly Income: \$ _____

2 People Living in Home

Total monthly income is

\$0 — \$1,726 \$1,727 — \$2,456 \$2,457 or more

6 People Living in Home

Total monthly income is

\$0 — \$3,529 \$3,530 — \$5,022 \$5,023 or more

3 People Living in Home

Total monthly income is

\$0 — \$2,177 \$2,178 — \$3,098 \$3,099 or more

7 People Living in Home

Total monthly income is

\$0 — \$3,980 \$3,981 — \$5,663 \$5,664 or more

4 People Living in Home

Total monthly income is

\$0 — \$2,628 \$2,629 — \$3,739 \$3,740 or more

8 People Living in Home

Total monthly income is

\$0 — \$4,430 \$4,431 — \$6,304 \$6,305 or more

5 People Living in Home

Total monthly income is

\$0 — \$3,078 \$3,079 — \$4,380 \$4,381 or more

9 People Living in Home

Total monthly income is

\$0 — \$4,881 \$4,882 — \$6,946 \$6,947 or more

PART 2: Signature

I certify (promise) that the information provided on this form is true and that I included all income. I understand that the school may receive state and federal funds based on the information I provide and that the information could be subject to review.

Parent or Guardian Signature _____ Date _____ Print Name of Parent or Guardian _____

*On this form we ask you for some information about the number of people living in your home and your income. Your child's school needs this information to help ensure it receives all the state funding it is entitled to. This information is private. It will not be used for any other purpose. It will **not** affect your child receiving free meals at this school.*

Who should I include in "Number of People Living in Home"?

To determine the number of people living in your home, count yourself and all the people who live with you and share expenses, whether they are related to you or not. Include children and adults. Do not include people who live with you but are financially independent, such as a boarder who pays rent.

What is included in "Total Monthly Income"? Total Monthly Income includes the following:

- **Gross earnings from work:** Use the gross income, not the take-home pay, for everyone living in your home. Gross income is the amount of money each person earns BEFORE taxes and any other deductions. This amount may be found on the paystub or requested from the employer. Net income should only be reported for self-owned business, farm, or rental income.
- **Welfare, Child Support, Alimony:** Include the amount each person living in your home receives from these sources, including any amount received from CalWORKs.
- **Pensions, Retirement, Social Security, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), and disability benefits:** Include the amount each person living in your home receives from these sources.
- **All Other Income:** Include worker's compensation, unemployment or strike benefits, regular contributions from people who do not live in your home and any other income received. Do not include income from CalFresh, WIC, federal education benefits and foster payments received by people living in your home.
- **Military Housing Allowances and Combat Pay:** Include off-base housing allowances. Do not include Military Privatized Housing Initiative or combat pay.
- **Overtime Pay:** Include overtime pay ONLY if you receive it on a regular basis.

If the number of people living in your home is more than 9, write the number of people living in your home and total monthly income in the space provided.

If your income varies, include the wages/salary that you regularly receive. For example, if you normally make \$1,000 each month, but you missed some work last month and made \$900, put down that you made \$1,000 per month. Only include overtime pay if you receive it on a regular basis. If you have lost your job or had your hours or wages reduced, enter zero or your current reduced income.

For additional information on Number of People Living in Home and Total Monthly Income, please see the Eligibility Manual for School Meals on the U.S. Department of Agriculture Guidance and Resource Web page at <http://www.fns.usda.gov/cnd/guidance/default.htm>.

En esta forma le pedimos información sobre el número de personas que viven en su hogar y sobre sus ingresos. La escuela de su hijo/a necesita esta información para ayudar a asegurar que reciba todos los fondos estatales a los que tiene derecho. Esta información es privada. No se utilizará para ningún otro propósito. Esto no afectará la elegibilidad de su hijo/a para recibir alimentos gratuitos en la escuela.

¿A quién debo incluir en el "número de personas en el hogar"?

Para determinar el número de personas que viven en su hogar, cuéntese usted mismo/a y todas las personas que viven con usted y comparten los gastos, ya sea que estén relacionados con usted o no. Incluya niños y adultos. No incluya gente que vive con usted pero que es financieramente independiente, como un huésped que paga renta.

¿Qué está incluido en los "ingresos mensuales totales"? Los ingresos mensuales totales incluyen lo siguiente:

- **Ingresos brutos del empleo:** Use el ingreso bruto, no el salario neto, de todos los que viven en su hogar. El ingreso bruto es la cantidad de dinero que cada persona gana ANTES de que se descuenten los impuestos y otras deducciones. Esta cantidad se puede encontrar en el talón de pagos o se puede solicitar al empleador. El ingreso neto sólo se debe reportar para negocios propios, granjas o ingresos por rentas.
- **Asistencia social, pensión para menores, pensión alimenticia:** Incluya la cantidad que cada persona que vive en su hogar recibe de estas fuentes, incluyendo cualquier cantidad que reciba de CalWORKs.
- **Pensiones, jubilación, seguro social, ingreso suplementario de seguridad (SSI), prestaciones para veteranos (VA) y beneficios por discapacidad:** Incluya la cantidad que cada persona que vive en su hogar recibe de estas fuentes.
- **Todos los demás ingresos:** Incluya la compensación por accidentes laborales, beneficios por desempleo o huelga, las contribuciones regulares de personas que no viven en su hogar y cualquier otro ingreso que reciba. No incluya los ingresos de CalFresh, WIC, beneficios educativos federales o pagos por el cuidado adoptivo temporal (conocido en inglés como foster care) que reciben las personas de su hogar.
- **Subsidios de vivienda para militares y paga por combate:** Incluya los subsidios de vivienda fuera de la base. No incluya el pago por la Iniciativa de Vivienda Militar Privatizada o el pago por combate.
- **Pago de horas extras:** Incluya el pago de horas extras SOLO si lo recibe regularmente.

Si el número de personas que viven es más que 9, escribe el número de personas que viven en su hogar y el total de ingresos mensuales de su hogar en el espacio provisto.

Si sus ingresos varían, incluya el salario que recibe regularmente. Por ejemplo, si normalmente recibe \$1,000 al mes, pero faltó al trabajo el mes pasado y recibió \$900, anote que recibe \$1,000 al mes. Sólo incluya el pago de horas extras si lo recibe regularmente. Si perdió su empleo o le redujeron la cantidad de horas o el sueldo, anote cero o el ingreso reducido actual.

Para obtener más información sobre el número de personas que viven en el hogar y el ingreso mensual total, consulte el Manual de Elegibilidad para recibir Comidas Escolares (Eligibility Manual for School Meals) en la página web de orientación y recursos del Departamento de Agricultura de Estados Unidos en <http://www.fns.usda.gov/cnd/guidance/default.htm>.

LCFF Survey

& Used By CEP and Provision II Schools



San Diego Unified School District

2016-2017 Household Application for Free and Reduced-Price Meals

Return application to your child's school or mail to SDUSD Food Services, 6735 Gifford Way Room 5, San Diego, CA, 92111.

For faster processing apply on-line at sandiegounified.org/food

CHILDREN'S RACIAL AND ETHNIC IDENTITY (OPTIONAL)
Mark one or more racial identities: American Indian or Alaska Native Asian Black or African-American Native Hawaiian or Pacific Islander White. Mark one ethnic identity: Hispanic or Latino origin Not of Hispanic or Latino origin

LIST ALL STUDENTS ATTENDING SAN DIEGO UNIFIED SCHOOL DISTRICT

Read the instructions included with Application on how to apply. PLEASE USE A BLACK PEN (no pencil).
Birthdate (Optional) M M Y Y Legal First Name MI Legal Last Name Grade School Code (See Guide) Check box if student has no income STUDENT'S Monthly Gross Income If Box is a Foster Child Check box Homeless, Migrant, Runaway

Do any Household Members (including you) currently participate in one or more ASSISTANCE PROGRAMS: "CalFresh, CalWORKS, Kin-GAP, or FDIPIR?"
If any member of your household receives CalFresh(SNAP/Food Stamps), CalWORKS, Kin-GAP, or FDIPIR, provide the name and case number for the person who receives benefits and skip to section 4. If no one receives these benefits, skip to section 3.

LIST ALL ADULTS & CHILDREN NOT ATTENDING SAN DIEGO UNIFIED SCHOOL DISTRICT

LIST ALL CURRENT MONTHLY INCOME (SEE INSTRUCTIONS)

California Education Code Section 49557(a): Applications for free and reduced-price meals may be submitted at any time during a school day. Children participating in the National School Lunch Program will not be overtly identified by the use of special tokens, special tickets, special serving lines, separate entrances, separate dining areas or by any other means. This Institution is an equal opportunity provider.

Print first and last name of all adults and children not listed above
LIST ALL HOUSEHOLD MEMBERS NOT LISTED ABOVE INCLUDING SELF
Check Box if No Income Monthly Gross Earnings from Work (before Deductions); ALL JOBS Monthly Pay from Pension, Retirement or Social Security Any Other Monthly Income

WRITE TOTAL NUMBER OF HOUSEHOLD MEMBERS HERE
Last Four Digits of Social Security Number (SSN) of Primary Wage Earner or Other Adult Household Member
Check if no SSN

I certify (promise) that all of the above information is true and correct and that all income is provided. If I checked the no income box or left it blank I certify (promise) that there is no income to report. I understand that this information is given in connection with the receipt of Federal funds, and that school officials may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws.

Signature of adult household member completing this form Today's Date
Printed Name of adult household member completing this form Address Apt

OPTIONAL - CONSENT TO SHARE INFORMATION FOR CALFRESH BENEFITS. Pursuant to California Education Code 49556(b)
Print Student Name Print Name of Parent/Guardian Signature of Parent/Guardian Today's Date

MEAL APPLICATION INSTRUCTIONS - for assistance please call (858) 627-7328

Complete application on-line at www.sandiegounified.org/food or complete and sign the attached application for Free and Reduced-Price Meals, return to your child's school office, cafeteria or mail to: SDUSD-Food Services - 6735 Gifford Way, Room 5, San Diego, CA 92111

HOUSEHOLDS RECEIVING CalFresh (also known as SNAP or FOOD STAMPS), CalWORKS, or FDIPIR COMPLETE SECTIONS:

- Print birthdate (optional), legal name, grade, school code number, and list Student's Gross Monthly Income (box if student has no income) for all students attending San Diego Unified School District (only one application per household is needed).
If the student is a Foster Child (a child whose care and placement is the responsibility of the State or who is placed by a court with a caretaker household). Please check the box. Foster children should be listed on the same meal application as the rest of the household.
- Provide the name of any household member (including adults) who receives CalFresh (SNAP/Food Stamps), CalWORKS, or FDIPIR AND the case number.
- Skip this section
- The adult household member who is completing the form MUST sign the application, date, print name, address, and phone numbers. The last four digits of the adult Social Security Number are not necessary.

HOUSEHOLDS WITH FOSTER CHILDREN

- Print birthdate (optional), legal name, grade, school code number, and list Student's Gross Monthly Income School District (only one application per household is needed).
If the student is a Foster Child (a child whose care and placement is the responsibility of the State or who is placed by a court with a caretaker household). Please check the box. Foster children should be listed on the same meal application as the rest of the household.
-If all children in the household are Foster Children, Skip section 2 and 3
-If some of the children are Foster Children: complete section 2 if anyone in the household has a case number (and go to section 4), complete section 3. Print the complete names of all adults and other household members, check the box if they do not have income or list the gross amount of income (amount before taxes and deductions), received last month in the correct source of income column. Military households should exclude the "Housing Allowance for Military Households" in Privatized Housing and any Combat Pay received. To calculate the monthly income, use the following conversion: If you are paid WEEKLY take the gross \$ amount times (X) 52 and divide the total by 12; if you are paid EVERY 2 WEEKS (BI-WEEKLY) take the gross \$ amount times (X) 26 and divide the total by 12; if you are paid TWICE A MONTH take the gross \$ amount times (X) 24 and divide the total by 12.
- The adult household member who is completing the form MUST sign the application, date, print name, address, phone numbers, and the last four digits of the Adult Social Security Number is required or check the box if you do not have a social security number (if all children listed are Foster or a case number is listed the last four digits of the social security number is not required).

ALL OTHER HOUSEHOLDS WILL COMPLETE SECTIONS:

- Print birthdate (optional), legal name, grade, school code number, and list Student's Gross Monthly Income (box if student has no income) for all students attending San Diego Unified School District (only one application per household is needed).
If the student is a Foster Child (a child whose care and placement is the responsibility of the State or who is placed by a court with a caretaker household). Please check the box. Foster children should be listed on the same meal application as the rest of the household.
- Skip this section
- Print the complete names of all adults and other household members, check the box if they do not have income or list the gross amount of income (amount before taxes and deductions), received last month in the correct source of income column. Military households should exclude the "Housing Allowance for Military Households" in Privatized Housing and any Combat Pay received. To calculate the monthly income, use the following conversion: If you are paid WEEKLY take the gross \$ amount times (X) 52 and divide the total by 12; if you are paid EVERY 2 WEEKS (BI-WEEKLY) take the gross \$ amount times (X) 26 and divide the total by 12; if you are paid TWICE A MONTH take the gross \$ amount times (X) 24 and divide the total by 12.
- The adult household member who is completing the form MUST sign the application, date, print name, address, phone numbers, and the last four digits of the Adult Social Security Number is required or check the box if you do not have a social security number.

HOMELESS, MIGRANT, OR RUNAWAY:

- Print birthdate (optional), legal name, grade, school code number.

Household Size	2016-2017 Federal Income Guidelines - Reduced-Price Meals (no charge in SDUSD)				
	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	21,978	1,832	916	846	423
2	29,637	2,470	1,235	1,140	570
3	37,296	3,108	1,554	1,435	715
4	44,955	3,747	1,874	1,730	863
5	52,614	4,385	2,193	2,024	1,011
6	60,273	5,023	2,512	2,319	1,159
7	67,931	5,663	2,832	2,614	1,307
8	75,591	6,304	3,152	2,910	1,455
Add'l family member, add	+7,656	+642	+321	+296	+148

Meal Application

& Used By Traditional Schools

Children fed nutritious meals are healthier,
attend school more consistently, and are
better positioned to learn