

**INSTRUCTIONS FOR COMPLETING
APPLICATION for EDUCATIONAL BENEFITS / MEALS**

If your household participates in FOOD STAMPS, MFIP, or FDPIR, follow these instructions:

Part 1: List each child's name, date of birth, grade, school, and case number. Medical Assistance case numbers do *not* qualify. Check if the case number is for MFIP, Food Stamps, or FDPIR.

Part 2: Skip this part.

Part e: If your children are approved for meal benefits, this information may be shared with Minnesota health programs to identify eligible children. Check the boxes only if you do not want your information shared.

Part 4: An adult household member must sign the form. A Social Security Number is not necessary.

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

Use a separate application for each foster child.

Part 1: Check the box indicating that you are applying for a *foster child*. List the foster child's name, date of birth, grade, and school. In the last column "SSI or other regular income to child," list any income that is designated for the child's personal use or write "none" if the child has no personal use income.

Part 2: Skip this part.

Part 3: If your foster child is approved for meal benefits, this information may be shared with Minnesota health insurance programs. Check the boxes only if you do not wish this information to be shared.

Part 4: An adult household member must sign the form. A Social Security Number is not necessary.

ALL OTHER HOUSEHOLDS, including WIC households, follow these instructions:

Complete an Application for Educational Benefits if your household income is less than or equal to the amount shown for your household size in this chart. These amounts are effective July 1, 2011 through June 30, 2012.

Household Size	\$ Per Year	\$ Per Month	\$ Twice Per Month	\$ Per 2 Weeks	\$ Per Week
1	20,147	1,679	840	775	388
2	27,214	2,268	1,134	1,047	524
3	34,281	2,857	1,429	1,319	660
4	41,348	3,446	1,723	1,591	796
5	48,415	4,035	2,018	1,863	932
6	55,482	4,624	2,312	2,134	1,067
7	62,549	5,213	2,607	2,406	1,203
8	69,616	5,802	2,901	2,678	1,339
For each additional household member add:	7,067	589	295	272	136

Part 1: List each child's name, date of birth, grade and school. If a child receives any regular income, such as SSI payments or income from a job, list the amount and how often it is received in the last column. Do not include occasional earnings such as babysitting, mowing lawns, etc.

Part 2: Report all incomes for all adult household members.

Names: List the first and last name of each adult living in your household, related or not (such as grandparents, other relatives, or friends), including yourself. Include a household member temporarily away from home such as a college student. Attach another page if necessary.

Gross Wages and Salaries: Next to each adult's name list the **gross income** earned from work before taxes and other deductions, **NOT take-home pay**. Next to each amount, write in how often the income is received (for example: weekly, every two weeks, twice per month, monthly).

All Other Incomes: List **all other amounts**, in addition to wages and salaries, which each person receives on a regular basis from any source. For self-employment, list *net* income after expenses.

No Income: Check if a person has no income.

Part 3: If your children are approved for meal benefits, this information may be shared with Minnesota health programs. Check the boxes only if you do not wish this information to be shared.

Part 4: An adult household member must sign the form and provide their Social Security Number. If the person signing the form does not have a Social Security Number, they must indicate this by checking the box.

Do not leave this section blank.