

E) Report income from Pensions / Retirement / All other income. Refer to the chart titled "Sources of Income for Adults" in these instructions and report all income that applies in the "Pensions / Retirement / All Other Income" field on the application.

F) Report total household size. Enter the total number of household members in the field "Total Household Members (Children and Adults)." This number **MUST** be equal to the number of household members listed in STEP 1 and STEP 3. 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 determines your income cutoff for free and reduced price meals.

G) Provide the last four digits of your Social Security Number. The household's primary wage earner or another 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 SS#."

Sources of Income for Adults		
Earnings from Work	Public Assistance / Alimony / Child Support	Pensions / Retirement / All Other Income
<ul style="list-style-type: none"> • Salary, wages, cash bonuses • Net income from self-employment (farm or business) • Strike benefits <p>If you are in the U.S. Military:</p> <ul style="list-style-type: none"> • Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances) • Allowances for off-base housing, food, and clothing 	<ul style="list-style-type: none"> • Unemployment benefits • Worker's compensation • Supplemental Security Income (SSI) • Cash assistance from State or local government • Alimony payments • Child support payments • Veteran's benefits 	<ul style="list-style-type: none"> • Social Security (including railroad retirement and black lung benefits) • Private Pensions or disability • Income from trusts or estates • Annuities • Investment income • Earned interest • Rental income • Regular cash payment from outside household

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 informations has been truthfully and completely reported. **Before completing this section, please also make sure you have read the privacy and civil rights statements on the back of the applications.**

A) Provide your contact information. 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) Sign and print your name. Print your name in the box "Printed name of adult completing the form." And sign your name in the box "Signature of adult completing the form."

C) Write Today's Date. In the space provided, write today's date in the box.

D) Share children's Racial and Ethnic Identities (optional). 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.**

STEP 5: LOUISIANS CHILDREN'S HEALTH INSURANCE PROGRAM (LACHIP) – OPTIONAL

Fill out this part if you do NOT wish to share information from your family application with the Louisiana Children's Health Insurance Program (LaCHIP).