Friend Public School August 2024 NEWSLETTER

Friend Public School 2024-25 Calendar

AUGUST

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I			Teacher Days
I	Qtr.	Ends	Scheduled
	1	10/11	45
	2	12/20	47
	3	3/12	47
	4	5/21	46
		Total	185

<u>August</u>

1 Flex day – 1-9

- PD/Teacher Workday 9 & 12
- 13 First Day of School 2:00 out

September

- 2 NO SCHOOL Labor Day
- 3 Teacher Cohort Day

<u>October</u>

- 2 PT Conferences 12:30 out
- NO SCHOOL Fall Break 4
- 11 End of Quarter 1

November

No School Nov. 27-29

December

20 End of Quarter 2 Holiday Break Dec 23-Jan1 NSAA Moratorium Dec 22-26

January

- 6 Teacher Cohort Day
- 7 Teacher Work Day

February

26 PT Conferences - 12:30 out

28 NO SCHOOL

March

12 End of Quarter 3 Spring Break 13-14

April

No School 18-21

May

- 10 Graduation
- 20 Last Day of School 12:30 out
- 21 Teacher Work Day

JANUARY

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Teacher Workday/No Students
No School Break Days
Flex Day
Dismiss 12:30
Dismiss 2:00

Total Student Days: 178

Welcome to the FPS 2024-25 school year. This year will hold many changes as we celebrate the last year for Friend Public School and move toward the dawn of consolidation with Exeter-Milligan. Our goal this year is to take time in the first semester to acknowledge and remember the history of Friend Public School and in the second semester prepare for the big changes ahead.

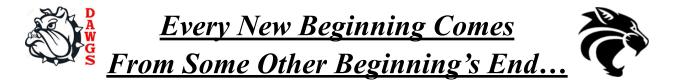
It is hard to believe that this will be my fourth year at FPS. This district and town continue to be a wonderful place to work and live. As with many of my beginning of the school year newsletters, I will inform you about changes to the school and work that has been done over the summer. These changes continue to be for the betterment of the district and to benefit our students.

One of the main changes this summer is a new HVAC system in the elementary. The old boiler system was beginning to have major problems. A new system is currently being installed. This will help with temperature control as well as benefit students with air circulation. Other major changes involve preparation for consolidation. The old gym floor has been redone and we are slowly moving to more black and silver around the building. There are new wall pads in both gyms as well new shot clocks installed to prepare for the basketball season.

Our custodial crew has done an outstanding job working around these projects and have been a joy to work with. They have also put in time with lawn and landscaping maintenance, and their willingness to do a diverse number of tasks makes me very proud of the work they accomplished.

As always, if you have any questions or concerns, please feel free to call the school or stop by to visit. We are looking forward to seeing all of our students back in the building on August 13th. Enjoy the rest of the summer!

Derek Anderson derek.anderson@friendschool.org



Hello, Parents and Students,

The summer season is coming to a close, and it is time to start the school year up, again! I hope you have had a wonderful summer break with your family and friends, and you are ready for a fun year of learning. We are so excited to see you on the first day of school; it is one of the most exciting days of the school year! Every day our goal is to come to school with a positive attitude and the flexibility to be a great classmate and friend, do what's best for our school and town and give 100 percent! Our school-wide theme this year is: "Every New Beginning Comes From Some Other Beginning's End." This is to honor and enjoy all of the years of being Friend Bulldogs and look forward to the new Exeter-Milligan-Friend Bobcat era, which begins in August of 2025. What an exciting time to be a part of our school district!

Our maintenance staff (Jay, Colleen, Deb, Kevin, Cortney and Jon) have worked extremely hard once again this summer (especially while having to work around the new HVAC construction and summer projects) to make our school such a beautiful, clean and welcoming place to learn. Everybody always comments how great our facilities look, and I couldn't agree more.

Thank you to our office staff who continue to work when everybody else leaves for the summer to make our school run successfully. Kim Hulse, Stacy Kirchhoff and Michele Johnson-Clouse go above and beyond for our students and staff and really put in the extra hours to prepare for every school year! Miss Elsberry, Mrs. Bartels, Mrs. Arp and Mrs. Brahmstedt, thank you for taking the time to run our Reading and Math Club this summer. The kids really enjoyed working with you!

Our teachers have been working hard during their summer break to get their classrooms and curriculum prepared for an amazing school year! They have attended summer classes, professional development, ran sports camps/weights and put in the extra effort for our students. We are excited to continue to watch the students grow from year to year!

Thank you to our fantastic community members in Friend for always supporting our students at their events or our school-wide events in a positive manner, and for being welcoming to our new staff members and families to Friend. I speak for everyone at Friend Public School when I say, thank you! Your support is felt and appreciated!

I feel very fortunate and blessed to be a part of this amazing team, community and school district. Education and kids are my passion, and there is not a better place than Friend to put my passion into full force than Friend Public School! I love recruiting new staff members and families to work and live in Friend; it is such an awesome town and school! I am excited to be starting my 17th year in education, and I have loved every minute of it. As an FHS alumni, I am honored to celebrate the ending of an era with our Friend Public School district and the excitement of our future as Exeter-Milligan-Friend Bobcats.

I believe that with a positive attitude, hard work and a great sense of humor you can accomplish so many things! The best part of the full coop that began in August 2023 is the new relationships that have formed between our students and community members, and those relationships will continue to flourish as we start the school year up again!

Here's to a great school year in 2024-2025! Liz Stutzman- PreK-12th Grade Principal



See you soon!



<u>August 8th</u> 5:00-6:00 PM Open House Night

For Elementary (Preschool-6th Grade) students and families. This is an Open House- please come and see your classroom, meet your teacher **and bring all of your school supplies.** The teachers will also hand out <u>very</u> <u>important</u> packets with ALL of the information you'll need to know for the upcoming school year in their classroom. On this important night, you will also sign up for classroom parties and parent teacher conferences.

August 12th 5:00-6:00 PM 7th Grade Orientation

All students entering 7th grade- with parents/guardians. **Please meet in the library.** We will talk about the ins and outs of 7th grade, meet your teachers and take a tour.

> **7:00 PM** 9th-12th Grade Parents Sports Meeting Information for the school year followed by a Booster Meeting in the <u>new gym.</u>

Please Welcome our New Staff for the 2024-2025 School Year

Jerratt Bradley- 5th Grade

Abby Lantis and Kara Myers- Speech

Lane Deines- School Psychologist

Welcome!! We are excited to have you join our awesome team at Friend Public School.

Stutzman's Side Notes

"Every New Beginning Comes From Some Other Beginning's End"

Elementary Reminders:

* Please have your immunizations and physicals complete and turned into the office so you are able to start school. This is a state law.

* Any forms handed to you on the first day of school (handbook, internet safety, etc.) will need to be returned by **Friday, August 16**th.

* For Kindergarten-6th Grade, school runs from 8:00-3:25.

Jr. High and High School Reminders:

* Please have your immunizations and physicals complete and turned into the office so you are able to start class and participate in activities. This is a state law.

- * Only water bottles with <u>water</u> are acceptable in school.
- * The school dress code needs to be followed at school <u>and</u> all activities.

* Drop and Adds for classes need to be done between August 5-20th. You'll need to fill out a form and have signatures from a parent, administrator and teacher to complete the process.

- * Students, please park in the north lot by the Catholic Church.
- * Please walk the "catwalk" or sit in the old gym before the 8:00 bell, unless you are eating breakfast.

* Any forms handed to you on the first day of school (handbook, internet safety, etc.) will need to be returned by <u>Friday, August 16th.</u>

* If you would like to participate in Softball, Volleyball, Cross Country, Girls Golf or Football, practices start on August 12th. You will also get forms from your coaches that will need to be handed in prior to you being able to start practice. *If you do not have these things completed, you will sit and watch the other students participate per NSAA rules.*

* Cell phones need to be placed in the cell phone charts/turned into a designated classroom spot during class time.

* School will run from 8:05-3:29. Please be on time to school and class.

*** If a student is missing school due to a medical appointment, the parents/guardians need to provide a doctor's note to the school for the absence to be counted as "excused." If the school does not receive a doctor's note within 1 day of the appointment, the absence will be counted as "unexcused." **This is for all of our students PreK-12**th **Grade.**

- 7-12 grade students wishing to make changes to their class schedules may see Ms. Hottovy at school August 5-9 from 8:30-11:30 a.m. and 12:30-3:30 p.m.
 - If you need to meet at a specific time, please schedule an appointment in advance by emailing Ms. Hottovy as soon as possible. Otherwise, students will be seen on a first-come, first-served basis.
 - Be sure you have discussed proposed schedule changes with your parent(s)/guardian(s).
 - \circ $\,$ It's a good idea to have multiple options in mind just in case your first choice doesn't work.
 - Remember that changing your schedule is a team decision made by you, your parent(s)/guardian(s), your teachers, your school counselor, and your principal.
 - No changes can be made to your schedule after August 20.
- Students who earned community service hours over the summer should return completed paperwork to Ms. Hottovy during the first week of school. Be sure to have all of the required signatures and information included!
- Seniors -- if you haven't started exploring colleges, now is the time.
 - Which school is the best fit for you? Which school offers programs that will meet your needs and interests? How will you pay to attend a certain college or university?
 - Many of these questions can be answered ONLY after you go on a college visit!
 - You will want to have begun narrowing your college choices before Apply2College Day in early October.
 - The goal is for you to have applied to at least 3 colleges before Thanksgiving.
 - Most colleges and universities are ready to schedule on-campus visits. Check their websites to schedule a visit.
 - You can also find a wide variety of information about schools across the country, including virtual tours, on this website:
 - <u>https://campustours.com/</u>
 - Some colleges and universities offer early application or early decision opportunities.
 - Not sure what that means? Read this article from CollegeBoard to learn more: <u>https://professionals.collegeboard.org/guidance/applications/early.</u>
- Freshmen, Sophomores, and Juniors -- Set Yourselves Up for Success
 - It's never too early to consider taking the ACT. In fact, it is highly recommended that you take the ACT on your own at least once or twice before you take it as part of required state testing during your junior year of high school.
 - Visit this website for more information regarding the test, testing dates, and how to register: <u>https://www.act.org/content/act/en/products-and-services/the-act.html</u>
 - As always, reach out to Ms. Hottovy with any questions.
 - If you need help paying for ACT registration, contact Ms. Hottovy for possible options.
- Parents How can you help your child prepare for the start of school?
 - Take a look at this website for some excellent tips! <u>https://kidshealth.org/en/parents/back-school.html</u>

I hope all of our students are ready to get back to learning and growing. I can't wait to see you! ~ Ms. Hottovy

AUGUST Breakfast & Lunch Menu

Monday	Tuesday	Wednesday	Thursday	Friday
			1	2
SUBJECT TO CHANGE WITHOUT NOTICE DUE TO AVAILABILITY OF CERTAIN PRODUCTS				
5	6	7	8	9
12	13	14	15	16
	<i>Donuts</i> Chicken Nuggets French Fries Bread/Butter <i>Fruit & Veggie Bar</i>	Scrambled Eggs Hamburger/Bun Corn Chips Fruit & Veggie Bar	French Toast Walking Taco Toppings Shredded Cheese Bread/Butter Fruit & Veggie Bar	Breakfast Pizza Stuffed Crust Pepperoni Pizza Pudding Fruit & Veggie Bar
19	20	21	22	23
Breakfast Bar Meaty Nachos Toppings Shredded Cheese Bread/Butter Fruit & Veggie Bar	Pancake Hot Dog/Bun Chili Shredded Cheese Fruit & Veggie Bar	Breakfast Bites Mandarin Orange Chicken Rice Bread/Butter Fruit & Veggie Bar	Egg, Cheese Omelet Biscuits & Gravy Tator Tots Juice Fruit & Veggie Bar	Apple Breakfast Bites Subs Chips Cookie Fruit & Veggie Bar
26	27	28	29	30
Egg Patty Chicken Strips Mashed Potatoes Gravy Bread/Butter Fruit & Veggie Bar	<i>Biscuits & Gravy</i> Mini Corn Dogs Potato Smiles <i>Fruit & Veggie Bar</i>	Breakfast Pizza Bacon, Egg, Cheese Spaghetti Shredded Cheese Breadsticks Fruit & Veggie Bar	French Toast Hamburger/Bun Baked Beans Fruit & Veggie Bar	<i>Chocolate Chip Muffin</i> Fiestada Refried Beans Churro Fruit & Veggie Bar

Friend Public School is an equal opportunity provider

August Activity Calendar 2024

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1	2	3
For updated information, please go to <u>https://friendbulldogs.soc</u> <u>s.net/</u> vcalendar/				Band Camp 5p-8p (7-12)		
4	5	6	7	8	9	10
				Pre-6 Back to School Night 5:00-6:00	Teacher Work Day EMF FFA Island Oasis Kick Off 3:45-9:45 Fall All Coach Meeting TBA	EMF Booster Club Golf Tournament 9:00
11	12	13	14	15	16	17
	Start of Fall Practice Teacher Work Day 7th Grade Orien. 5:00-6:00 EMF Fall Sports Meeting (Friend) 7:00 EMF Booster Meeting -following sports meeting	2:00 OUT First day of school BOE-Media Center 7:30		SB Jamboree @ Lincoln 5:00	<u>2:00 OUT</u>	
18	19	20	21	22	23	24
		School Picture Day Teacher Appreciation Dinner 6:00	5th Grade Band Instrument Rental 6:00-7:00 FCA Lunch Meeting Mr. Hitchcock	SB Triangle @ Cairo 4:00 VB Sports Drink Scrimmage (Friend) 5:30 GG @ Central City 10:00	2:00 OUT FB Sports Drink Scrimmage (Friend) 7:00	SB Triangle (Geneva) 10:00
25	26	27	28	29	30	31
	VB Jamboree @ Superior 5/6/7 SB @ Aurora 5:00/6:30 GG Triangle (FCC) 4:00	SB vs. Fairbury (Geneva) 5:00/6:30		Marching Band & Dance @ NE State Fair 11:15 VB Triangle @ Pawnee City 5:00 XC @ McCool (Camp Kateri) 7:00	2:00 OUT FB @ Clarkson-Leigh (Leigh) 7:00 Pioneer Conference Leadership Summit @ Peru FFA State Fair	SB FC Quad (Geneva) 10:00 FFA State Fair

Upcoming Dates:

<u>August 8th:</u> Open House Night for Elementary (Preschool-6th Grade) Students and Families. 5:00-6:00. We cannot wait to see all of you!

<u>August 12th:</u> 7th Grade Orientation for incoming 7th graders and their parents/guardians. 5:00-6:00 in the library.

<u>August 12th:</u> 9^{th} -12th grade sports parents/coaches and booster meeting at 7:00 in the new gym.

<u>August 13th:</u> First day of School (ALL students Preschool-12th Grade)= 8:05-2:00. You can enter at 7:45 if you are having breakfast. If you are NOT eating breakfast, elementary students need to be on the recess playground, and secondary students need to be in the old gym. Please DO NOT come to school before 7:45 AM. Parents of elementary students, the best place to drop off your kids is the Kindergarten ramp doors. The buses drop off on the west side of the school.

<u>Friday, August 16th:</u> All forms need to be signed and handed into the office. It's your responsibility to get those to your parents and handed back into school.

<u>Pre-School=</u> 3 Year old's=8:00-11:15 and 4 Year old's= 12:15-3:25. Pre-School runs Mondays-Thursdays. No Pre-school on Friday's.

<u>August 20th:</u> School Picture Day (Don't forget your forms, please.)

<u>September 2nd and 3rd</u>: No School

<u>September 16-20:</u> Homecoming week!

REMINDER:

Any JH/HS student participating in an EMF activity is required to have a sports physical prior to the start of fall practice on Monday, August 12th.

Your student will not be able to participate in practice until the physical and NSAA release forms have been received in the school office.

Forms are available in the office during normal business hours or on the school website at:

https://friendbulldogs.socs.net/vimages/shared/vnews/stories/6290f2d926a90/NSAA%20Consent%20Form.pdf https://nsaa-static.s3.amazonaws.com/textfile/spmeds/PPE.pdf



- BACKPACK- REGULAR SIZE
- EXTRA SET OF CLOTHING (SEASONAL)
- PLAY-DOH (4 PACK)
- KLEENEX (2 BOXES)
- CLOROX WIPES (1 CONTAINER)
- EXPO MARKERS SET OF 4 (3'S-REG. 4'S- FINE TIP)
- QUART AND GALLON SIZE BAGS (1 BOX OF EACH)

DONATION ITEMS: OLD MAGAZINES AND SCRAPBOOK PAPER.



<u>Kindergarten</u>

- (2) boxes of 12 or 24 count
 Crayons
- (1) 24 pack of #2 yellow pencils (Ticonderoga)
- (12) large glue sticks
- (4) 2 pocket folders
- Red, Yellow, Green, Blue
- (1) box Zip-Lock bags
- Girls: Gallon size Boys: Quart size
 - (3) containers of Clorox wipes
 - (3) boxes of Kleenex
 - (1) Pair of Scissors
 - Girls 4 pack of playdough
 - Boys 1 bottle hand sanitizer

** Do not need to label items as we put them all together and share!

2024-25 Friend Elementary Supplies

Grade 4

Crayons, Colored Pencils, or

(1) big boxes of Kleenex

(2) spiral notebooks single

(4) Odorless Fine point Dry

(1) container of Clorox Wipes

Optional inexpensive earbuds

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(4) No. 2 pencils

markers

subject

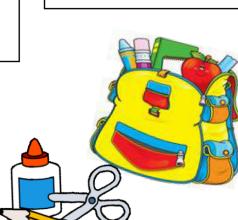
(1) big eraser

(2) red pens

Erase Markers

(2) Large Glue sticks

(3) 2-pocket folders



(1 box) Washable markers

(1 pack) sharpened pencils

(1) boxes 24 Crayons

(4) Dry Erase Markers

(1) 2-pocket folder

(2) large glue sticks

(1) Pair of Scissors

(1) boxes of Kleenex

(Ticonderoga)

(2) Big Pink Eraser

Grade 1

(1) Pencil box

<u>Grade 5</u>

- (2) single subject spiral
 notebooks wide ruled
- (1) pencil box
- (4) red pens
- (2) large boxes of facial tissues
- (1) large eraser
- (1) box crayons
- (2) box markers
- (4) odorless dry erase markers
- (2) large glue stick
- (1) scissors
- inexpensive pair of earbuds
- (20 container Clorox wipes)
- (1) large hand sanitizer

<u>Grade 2</u>

- (1) (16 count or more)
 Crayons
- (1) (24 pack) #2 yellow Pencils
- (2) Glue sticks
- Markers
- (1) Scissors
- (1) Spiral Notebook
- (2) Erasers
 - (2) 2-pocket folders
- (2) Dry Erase Markers

<u>Grade 3</u>

(Please bring your supplies on Walk To School Night)

- (2) large boxes of Kleenex
- (2) container of Clorox
 Wipes
- (1 Pack) Sharpened #2 pencils
- (2) red pens
- (2) spiral notebooks
- (1) hand sanitizer
- (3) 2 pocket folders
- (1) pack of sticky notes
- (4) dry erase markers
- (2) big eraser
- (2 Packs) markers
- (2 Packs) crayons
- (1) scissor
- (1) composition notebook
- (1) pencil box
- (1 set) earbud headphones

<u>Grade 6</u>

- Pencils
- (4) red ball point pens
- (1) single subject spiral notebooks
- (6) odorless dry erase markers
- (1) whiteboard eraser
- Scissors
- Glue stick
- Calculator
- Markers or colored pencils
- (2) large boxes of Kleenex
- Inexpensive ear buds
 - (1) container Clorox wipes

7th-12th Grade Supply List

<u>In General:</u>

1. Pencils, Notebooks, Pens, Glue Sticks, Highlighters, and Binders

Specific needs if you have this teacher:

<u>Mrs. Niemeier and Mrs. Klooz = MATH</u>

- 1. Loose-leaf notebook paper
- 2. Binder 1.5" (1" will be too small)
- 3. Dividers for binder (4 is plenty)
- 4. Calculator: (Recommended) TI-34 Multiview or TI-84 Plus for higher-level classes

<u>Mrs. Kohtz = AG</u>

- 1. All 9th-12th grade Ag. Students= 250 sheets spiral notebook
- 2. One pair of earbuds/headphones- use for virtual simulators
- 3. Pair of scissors

<u>Mr. Martin = HISTORY</u>

- 1. 12th Graders= Binder for your election project, notebook, 2 pocket folder
- 2. 7th-11th Graders= a notebook, colored pencils, glue sticks, pair of scissors

Mrs. Wade = ENGLISH 7, ENGLISH 8, ENGLISH 9

- 1. 1 composition book that will stay in the classroom with 100 sheets/200 pages--NO spiral notebooks!
- 2. Scissors
- 3. Colored pencils
- 4. 4 glue sticks (may need to be replaced throughout the year)
- 5. 1 pair of earbuds/headphones

Miss Daudt = INSTRUMENT EXPLORATION, WORLD MUSIC DRUMMING, MIDDLE SCHOOL MUSIC

- 1. 1 composition book that will stay in your assigned music slot-no spiral notebooks
- 2. 1 pair earbuds/headphones

<u>Mr. Pfeiffer= SCIENCE</u>

- 1. Notebook,
- 2. Calculator for all classes (Recommended TI-34 or a TI-84)

Mrs. Anderson= ENGLISH 10, 11, 12, Exploratory Literature, Journalism, Speech

- 1. 1 composition book NO spiral notebook please
- 2. Loose-leaf notebook paper
- 3. One-inch binder
- 4. Seven Dividers for binder
- 5. Post-it notes (different colors) for annotating novels

Mrs. Ricenbaw= Study Skills

- 1. Folder
- 2. Highlighter
- 3. School Planner

<u>Ms. Hottovy – Junior High Explore/Guidance</u>

- 1. Folder or binder
- 2. 1 spiral notebook
- 3. Highlighter

Mrs. Stutzman - Spanish and Health

- 1. Notebook
- 2. Folder or binder

PLEASE FILL OUT THE FORM ON BACK EVEN IF YOU DO NOT HAVE CHILDREN

Each year the school is required by State Law 79-578 to take a census of the school district. The main purpose is to locate all children between the ages of birth to 21.

We ask your cooperation in filling out and returning the form on the next page. Please drop the form off at the school office in Friend or mail to: Friend Public Schools, P.O. Box 67, Friend, NE 68359.

The information collected is confidential and will not be made available to the public. This information is a necessary part of the formula to determine the amount of State Aid

received by the school district. It is also used to obtain a list of incoming kindergartners and to project future enrollment. College students under the age of 21 should be listed if they live at home during the summer.

If you are moving, please return the completed form with your moving date written on the form. If you know who will be living in your present home, we would appreciate the information.

If you have any questions, please call the school office at 402-947-2781. Your cooperation is greatly appreciated.

Sincerely,

Derek Anderson Superintendent

State of Nebraska School Law

79-578, CLASS I, II, III, IV, VI SCHOOL DISTRICT; OR I SECRETARY; SCHOOL CENSUS; DUTY TO TAKE; TIME ALLOWED. The secretary of a Class I, II, III, IV, or VI school district shall take, or cause to be taken by some person appointed for the purpose by a majority vote of the school board, the census of the school district and then make, or cause to be made, a list in writing of the names of all the children belonging to such district, from birth through twenty years of age, together with the names of all the taxpayers in the district. A copy of this list, verified by oath of the person taking such census or by affidavit appended to or endorsed on the list, setting forth that it is a correct list of the names of all children belonging in the district from birth to twenty years of age and that it reflects such information as of June 30, shall be maintained as provided in section 79-524 (Laws 1881;1889; 1931;1949; 1957; 1967; 1976; 1978; 1990; 1991; 1992; 1996; 1999)

Residents of Household: (Last Name, First Name)	Street Address
	Mailing Address
	City
	Phone

Below list all persons in the household under 21 years of age

	В	irthda	te			
Name	Mo.	Day	Yr.	Male	Female	Place of Birth

Thank you for all of your support and assistance.

STUDENT ACCIDENT INSURANCE COVERAGE

POLICY GA-2200Ed.11-16(ID)(KS)(LA)(MN)(MT)(NC)(ND)(OH)

Premiums & Coverage Options

-

One Time Policy Year Premiums

School Time Coverage Grades PK-12 (Does NOT Include Interscholastic Sports Coverage grades 7-12) Protects the student while: a) attending regular school sessions, b) participating in or attending school-sponsored and supervised extracurricular activities, c) traveling directly to and from school for regular school sessions, and while traveling to and from school-sponsored and supervised extracurricular activities in school provided transportation. DOES NOT cover participation in interscholastic sports for students in grades 7-12.	\$16
Full Time Coverage Grades PK-12 (Does NOT Include Interscholastic Sports Coverage grades 7-12) Covers the student 24 hours a day until school starts next year. Includes coverage while at home and school, on weekends and during summer vacation. DOES NOT cover participation in interscholastic sports for students in grades 7-12.	
School Time Coverage Grades PK-12AND Interscholastic Sports Coverage Grades 7-12 (does not include Football grades 9-12) In addition to School-Time Coverage shown above, includes All Interscholastic Sports Coverage that protects the student while practicing for or competing in school-sponsored and supervised interscholastic sports including travel in school provided transportation for grades 7-12. DOES NOT cover Football for grades 9-12.	
Full Time Coverage Grades PK-12 AND Interscholastic Sports Coverage Grades 7-12 (does not include Football grades 9-12) In addition to the Full-Time Cover- age shown above, includes All Interscholastic Sports Coverage that protects the student while practicing or competing in school-sponsored and supervised interscholastic sports including travel in school-provided transportation for grades 7-12. DOES NOT cover Football for grades 9-12.	^{\$} 174
Football Coverage Grades 9 - 12 Protects the student while practicing for or competing in school-sponsored and supervised interscholastic football including travel in school-provided transportation for grades 9-12.	\$250
Extended Dental Coverage Grades PK-12 Provides benefits up to a maximum of \$5,000 for any dental Injury. Covers the student 24 hours a day until school starts next year. Treatment must begin within 60 days from the date of the Injury and must be performed within one year from the date of Injury. However, if within the one year period following the date of Injury the student's attending dentist certifies that dental treatment and/or replacement must be deferred beyond one year, the policy pays the estimated cost of such deferred treatment, but not to exceed \$200 for each tooth. Benefits for prostheses are limited to \$500 per injury, including procedures performed to install them. Dental prostheses include, but are not limited to: crowns, dentures, bridges, and implants. Extended Dental does not cover treatment for orthodontics, dental disease, or expenses that exceed the dental prosthesis maximum benefit limit.	\$9
The Medical Benefits and Exclusions below apply to the Coverage Options listed above.	
MEDICAL BENEFITS (What the Insurance Plan Pays) - When injury covered by the policy results in treatment by a Licensed Physician within 60 days from t accident, the Company will pay the Usual and Customary Charges (U&C) incurred for covered services as listed below, for charges actually incurred within one the date of injury up to the specified Maximum Medical Benefit of \$50,000 per injury. (In MT and NC benefits are payable after the deductible per injury is sa deductible is the amount paid or payable for the same injury by Other Valid Coverage) This policy will pay benefits regardless of Other Valid Coverage if the covered claim expense is less than \$200. If the covered claim expense exceeds \$200, be be paid first by Other Valid Coverage. (This coverage is excess in KS, and this coverage is primary in MT and NC after deductible, and in ID, IL)	year from tisfied, the

All Amounts Listed Below are Per Injury PHYSICIAN'S SERVICES a) Surgical Care (surgeon, assistant surgeon, and anesthesia)80% U&C, up to \$2,500 b) Nonsurgical Care (includes physiotherapy performed other than in a hospital, 1 visit per day).....U&C, up to \$2,500 HOSPITAL CARE a) Inpatient Care 1) Hospital Semi-Private Room 2) Hospital Miscellaneous Services 80% U&C, up to \$2,500 2) Prospital information of the contract (when medical treatment is required for covered injury) MOTOR VEHICLE INJURYU&C, up to \$250

The policy contains a provision limiting coverage to the usual and customary charges. This limitation may result in additional out-of-pocket expenses for the insured. J-1511/1513(2024)

Ameritas 💭 💻	ENROLLMENT FO	ORM FO	R ST	JDENT ACCIDEN	T INSURANCE		
Ameritas Life Insurance Corp. Lincoln, Nebraska				COVERAGE PL	LANS One Time	Policy Year Pren	niums
Lincoli, Iveolaska				Full Time Coverage	ge (Does NOT include Coverage)	□ \$	99
↑ STUDENT'S LAST NAME ↑	(one letter in each box)		6	Full Time Coverage Coverage (Does not i	AND Interscholastic Spo include Football Grades 9-12	rts	174
STUDENT'S FIRST NAME Please Print		M.I.		School Time Cove	erage (Does NOT Include s Coverage)	□ \$	16
Address	(Street)			School Time Coverage Coverage (Does not in	ge AND Interscholastic Spo clude Football Grades 9-12)	rts 🗌 \$	91
(City)	(State)	(Zip)	Ø	Football Coverage	e (Grades 9-12)	□ \$2	250
Email Address Name of School				Extended Dental	Coverage (Grades PK-12)	□ \$	9
Name of District			DON	IOT SEND CASH	TOTAL PREMIUM		_
Student's Age Grade	ePhone			Make Checks pa *Please write s	ayable to: STUDENT ASSUB student's name on the front o	RANCE SERVIC f check. NO RE	ES, INC. FUNDS
X	Parent or Guardian) (Date)					J-1511	/1513(2024)

EXCLUSIONS (What the Plan DOES NOT Pay)

- Any sickness, disease, infection (unless caused by an open cut or wound), including but not limited to: aggravation of a congenital condition, blisters, headaches, hernia of any kind, 1. mental or physical infimity, Osgood-Schlatter disease, osteochondritis, osteochondritis dissecans, osteomyelitis, spondylolysis, slipped fenoral capital epiphysis, orthodontics. Injuries for which benefits are paid under Workers' Compensation or Employer's Liability Laws. (In NC, benefits are excluded if the employee, employer, or carrier is 2
- responsible or liable according to final adjudication or settlement order under state law) Any Injury involving a two or three-wheeled motor vehicle or snowmobile or any motorized or engine driven vehicle not designed primarily for use on public streets and highways, 3
- The practice or play of interscholastic sports including travel to or from such activity, practice, or play of interscholastic sports including travel to or from such activity, practice, or play of students in grades 7-12, unless such premium is paid.
- In Kansas No benefits are payable for accidental bodily Injuries arising out of a motor vehicle accident to the extent such benefits are payable under any medical expense pay-5. ment provision (by whatever terminology used including such benefits mandated by law) of any automobile policy.
- 6 In Ohio - Reiniury if the insured participated in a covered activity against medical advice

IT IS NOT THE INTENT OF THE POLICY TO PROVIDE BENEFITS FOR AN EXISTING MEDICAL PROBLEM. A re-injury will not be covered if the insured has received treatment within a period of 180 days prior to the effective date of the policy. (In OH, this provision does not apply)

WHAT KIND OF INSURANCE IS THIS?

This is accidental bodily injury insurance; it covers accidental bodily injury occurring while the coverage is in force. Medical illnesses such as ear infections or sore throats are not covered

WHO SHOULD CONSIDER BUYING THIS INSURANCE?

- All families with no other health coverage.
- Families with other medical or dental coverage having deductibles, copays or coinsurance. Our policy applies benefits toward your other health coverage out-of-pocket expenses. (This coverage is primary in MT and NC after deductible, and in ID, IL) 2

HOW TO ENROLL

- Select the desired coverage(s) from the options listed above. Premium cannot be prorated. There are two enrollment and payment options. Complete the Enrollment Form and enclose the premium (check made payable to: STUDENT ASSURANCE SERVICES, INC. or credit card payment information). Please
- 2 write the name of the student on the check. Return the premium payment with the requested enrollment information in an envelope and mail to: Student Assurance Services, Inc. P.O. Box 196, Stillwater, MN 55082-0196; OR Complete enrollment form online at the Student Assurance Services, Inc. website <u>www.sas-mn.com</u>. The online form is available under the K-12 School Look-up. Be sure to retain this brochure and a copy of the premium payment as proof of insurance. You will not receive a policy or ID card. The master policy is issued to the school.
- 3

4

EFFECTIVE AND EXPIRATION DATES

Coverage becomes effective the later of: the Master Policy Effective Date; or 12:01A.M. following the date the envelope containing the enrollment form and premium payment is postmarked by the U.S. Postal Service; or for online enrollment 12:01A.M. following the date the proper premium is received by the Plan Administrator. Interscholastic sports coverage expires on the last day of the authorized season of the current school year. School-Time and Full-Time coverage expire on the selected expiration date of the annual term policy.

HOW TO FILE A CLAIM

- Notify the school and obtain a claim form immediately. The school will fill out Part A of the claim form if it's a school injury. Parents complete Part B of the claim form. Answer all questions.
- 2
- Submit copies of the student's *itemized bills* to the student's family medical and dental coverage first, even if there is a large deductible. The other insurance plan will send a report called an Explanation of Benefits (EOB). This plan is supplemental to all other valid coverage. The claim must be filed with the other coverage first! (Coverage is excess in KS, primary in MT and NC after deductible, and in ID, IL) This Plan **DOES NOT** cover penalties imposed for failure to use providers 3 preferred or designated by the primary coverage. (In KS, penalty does not apply) Send the completed claim form, copies of student's itemized bills and EOB to:
- 4
 - STUDENT ASSURANCE SERVICES, INC
 - PO BOX 196 STILLWATER, MN 55082
- 5. No claim can be completed until all of the above documents have been provided.

NOTE: Student must be treated by a Licensed Physician within 60 days of the date of the injury. Proof of claim should be submitted within 90 days from the date of accident, or a reasonable time thereafter not to exceed one year. Itemized bills should be submitted within 90 days from the date of treatment or reasonable time thereafter not to exceed one year. Itemized bills should be submitted within 90 days from the date of treatment or reasonable time thereafter not to exceed one year. The policy is responsible only for expenses incurred within one year. (In NC, itemized bills must be submitted within 180 days from the date of treatment, not to exceed one year)

This provides a very brief description of some of the important features of the insurance policy. It is not the insurance policy and does not represent it. A full explanation of benefits, exceptions and limitations is contained in the Group Accident Insurance Policy Form GA-2200Ed.11-16 (and any state specific), and any applicable endorsement(s). This policy is considered term accident insurance (except in ID) and is non-renewable. This product may not be available in all states and is subject to individual state regulations. The Master Policy is issued to the School District/School. A copy of the Privacy Notice and Certificate of Coverage (where applicable) may be obtained on the website www.sas-mn.com.

				J-1511/1513(2024)
Administered by	C			Underwritten by
STUDENT ASSURANCE SERVICES, INC. PO Box 196 • Stillwater MN 55082-0196 Toll Free 800-328-2739 - (651) 439-7098 www.sas-mn.com	STUDENT ASSURANCE SERVICES	HAVE QUE CALL US TO (800) 328-2739 O	LL FREE AT	Ameritas Life Insurance Corp. Lincoln, Nebraska
		******	*****	
STUDENT ACCIE		SURANCE CRE	DIT CARD PAY	MENT
INDICATE PREMIUM SELECTED AND COMPLETE There is a \$5.00 Processing		ED ENROLLMENT INFORMAT		
Please charge \$ + \$5.00 Processing			Card Expiration Date	Discover®
Credit Card Number		de (on back of card, 3 digits)		dit card billing will state: dent Assurance Services, Inc."
Print Cardholder Name			Date / / /	
Cardholder Signature				
Cardholder Address(Street)		(City)	(State) (Zip)	
Telephone Number ()				
GAA-2203Ed.11-16	DETACH -	Place inside enve	lope	J-1511/1513(2024)

FRIEND PUBLIC SCHOOL PO Box 67 Friend NE 68359

July 17, 2024

Dear Parent/Guardian:

Children need healthy meals to learn. Friend Public School offers healthy meals every school day. Breakfast costs \$2.00; lunch costs \$3.05 for elementary and \$3.30 for secondary students. Your children may qualify for free or reduced-price meals. Reduced price is \$.30 for breakfast and \$.40 for lunch. If your child(ren) qualified for free or reduced-price meals at the end of last school year, you must submit a new application by September 25, 2024, in order to avoid an interruption in meal benefits.

This packet includes an application for free or reduced-price meal benefits and a set of detailed instructions. Applicants who qualify for free or reduced-price meals also qualify to receive Summer EBT, which provides \$120 in grocery funds on an EBT card mailed to the household during summer break. Below are some common questions and answers to help you with the application process.

- 1. WHO CAN GET FREE OR REDUCED-PRICE MEALS?
 - All children in households receiving benefits from the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) or the Food Distribution Program on Indian Reservations (FDPIR) are eligible for free meals.
 - Foster children that 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.
- 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 haven't been told your children will get free meals, please call or e-mail: FPS, Derek Anderson, Superintendent, 402-947-2781, derek.anderson@friendschool.org
- 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. We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to: FPS, Derek Anderson, Superintendent, 402-947-2781, derek.anderson@friendschool.org
- 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 please read the letter you got carefully and follow the instructions. If any children in your household were missing from your eligibility notification, contact Michele Johnson-Clouse at FPS 402-947-2781, immediately.
- 5. CAN I APPLY ONLINE? You are encouraged to complete an online application instead of a paper application <u>if</u> your school district makes this option available. The online application has the same requirements and will ask you for the same information as the paper application. (*Not available at Friend Public School.*)

- 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 few 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. If you do not send in a new application that is approved by the school or you have not been notified that your child is eligible for free meals, your child will be charged the full price for meals.
- 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. Please 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 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: Derek Anderson, Superintendent, 402-947-2781, derek.anderson@friendschool.org
- 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 <u>normally</u> receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 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, please write a 0 in the field. However, if any income fields are left empty or blank, those will <u>also</u> be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you <u>meant</u> 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, 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 Michele Johnson-Clouse, FPS, PO Box 67, Friend NE 68359, 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, please go online to ACCESSNebraska.ne.gov or call 1-800-383-4278.

If you have other questions or need help, call 402-947-2781 EXT 210.

Sincerely,

Michele Johnson-Clouse

Business Manager

Instructions for Completing the Free & Reduced-Price School Meals Family Application

For households receiving benefits from the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) or the Food Distribution Program on Indian Reservations (FDPIR), follow these instructions:

- Part 1: List each child's name, the school they attend and their grade.
- Part 2: Enter household's Master Case Number if the household qualifies for SNAP, TANF or FDPIR.
- Part 3: Skip this part.
- **Part 4:** Complete this part. An adult must sign the form.
- **Part 5:** This part is optional and does not affect your children's eligibility for free or reduced-price meals. If you do not select race or ethnicity, one may be selected based on visual observation.

For households with FOSTER, HOMELESS, MIGRANT or RUNAWAY CHILDREN, follow these instructions:

If all children in the household are foster children:

- Part 1: List all foster children, the school they attend and their grade. Check the box indicating the child is a foster child.
- Part 2: Skip this part.
- Part 3: Skip this part.
- Part 4: Complete this part. An adult must sign the form.
- Part 5: This part is optional and does not affect your children's eligibility for free or reduced-price meals. If you do not select race or ethnicity, one may be selected based on visual observation.

If some of the children in the household are foster children or are homeless, migrant or runaway children:

- **Part 1:** List all children, the school they attend and their grade. Check the appropriate box.
- Part 2: If the household does not have a Master Case Number, skip this part.
- **Part 3:** Follow these instructions to report total household income from last month.

Column 1 – Household Members: List the first and last name of **each** person living in your household, related or not (such as grandparents, other relatives or friends) who share income and expenses. Attach another sheet of paper if necessary.

Column 2 - Gross Income and How Often it was Received: Gross income is the amount earned <u>before</u> taxes and **other deductions;** it is not your take-home pay. For each household member, list each type of income received for the month. You must also report how often the money is received – weekly, every other week, twice a month, or monthly.

Earnings from Work includes the following:

- Salary, wages, cash bonuses
- Net income from self-employment (farm or business)
- If you are in the U.S. Military, include:
 - Basic pay and cash bonuses (do not include combat pay, Family Subsistence Supplemental
 - Allowance (FSSA) payments or privatized housing allowances)
 - Allowances for off-base housing, food and clothing
- Do not include income from SNAP, FDPIR, WIC, Federal education benefits and foster care payments.

Public Assistance/Child Support/Alimony includes the following:

- Unemployment benefits, Worker's compensation
- Supplemental Security Income (SSI), Cash assistance from state or local government
- Veteran's benefits (VA benefits), Strike benefits
- Child support payments, Alimony payments

Pensions/Retirement/All Other Income includes the following:

- Social Security payments (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
- and Regular cash payments received from outside the household.

If you have no income, write "0" or leave the income field blank. By doing this, you are certifying there is no income to report.

Household Size: Enter the total number of people in your household.

Social Security Number: The adult signing the form must list the last four digits of their Social Security Number (SSN) or check the box to the right labeled "Check if no SSN."

- Part 4: Complete this part. An adult must sign the form.
- **Part 5:** This part is optional and does not affect your children's eligibility for free or reduced-price meals. If you do not select race or ethnicity, one may be selected based on visual observation.

Please note: Children who meet the definition of homeless, migrant or runaway, are eligible for free meals. However, the school district must have documentation on file from a migrant coordinator, homeless/runaway liaison or the district's Direct Certification list to approve the child for free meals.

For ALL other households, follow these instructions:

- Part 1: List all children, the school they attend and their grade.
- Part 2: If the household does not have a Master Case Number, skip this part.
- Part 3: Follow these instructions to report total household income from last month.

Column 1 – Household Members: List the first and last name of **each** person living in your household, related or not (such as grandparents, other relatives or friends) who share income and expenses. Attach another sheet of paper if necessary.

Column 2 - Gross Income and How Often it was Received: Gross income is the amount earned **before taxes and other deductions;** it is not your take-home pay. For each household member, list each type of income received for the month. You must also report how often the money is received – weekly, every other week, twice a month, or monthly.

Earnings from Work includes the following:

- Salary, wages, cash bonuses
- Net income from self-employment (farm or business)
- If you are in the U.S. Military, include:
 - Basic pay and cash bonuses (do not include combat pay, Family Subsistence Supplemental Allowance (FSSA) payments or privatized housing allowances)
 - Allowances for off-base housing, food and clothing

Do not include income from SNAP, FDPIR, WIC, Federal education benefits and foster care payments.

Public Assistance/Child Support/Alimony includes the following:

- Unemployment benefits, Worker's compensation
- · Supplemental Security Income (SSI), Cash assistance from state or local government
- · Veteran's benefits (VA benefits), Strike benefits
- · Child support payments, Alimony payments

Pensions/Retirement/All Other Income includes the following:

- Social Security payments (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 and *Regular* cash payments received from outside the household.

If you have no income, write "0" or leave the income field blank. By doing this, you are certifying there is no income to report.

Household Size: Enter the total number of people in your household. **Social Security Number**: The adult signing the form must list the last four digits of their Social Security Number (SSN) or check the box to the right labeled "Check if no SSN."

Part 4: Complete this part. An adult must sign the form.

Part 5: This part is optional and does not affect your children's eligibility for free or reduced-price meals. If you do not select race or ethnicity, one may be selected based on visual observation.

Free & Reduced-Price School Meals Family Application - complete one application per household Attachment C: 2024-25

Return Completed Application to:		Frier	nd Publ	ic School, F	O Box 67, Fr	riend	NE 68	359
Part 1: Children in School								
List names of all children in school (First, Middle Initial, La If <u>all</u> children listed are foster, skip to Part 4 to sign the form If some of the children are foster or are homeless, migrant	ı. Ó						Check Foster Child	<u>all that apply</u> : Homeless, Migrant, Runaway
runaway children, complete all steps of the application.		Grade	N	ame of Schoo	I Child Attends			
Dert O. Anglister a Deserver ONAD TANE		Derefite						
Part 2: Assistance Programs – SNAP, TANF or Enter MASTER CASE NUMBER if household qua								
(Social Security numbers, Medicaid numbers and EBT r					, L			
Part 3: Total Household Gross Income – You m				-				
					nd How Ofte			
List everyone in the household, current income each person earns in whole dollars (no cents) & how often.		ings from pre deduct			stance, Child ;, Alimony			etirement and er Income
Entering "0" or leaving the income field blank certifies			10115	Support	, Alimony			
no income to report. A foster child's personal use income must be listed.	Incom		w often	Income	How often	 Inc	come	How often
Total Number of Household Members:	Last fou	I l l l l l l l l l l l l l l l l l l l	Social S	L Security Numb	er (SSN) of the	<u> </u>		
(Children and Adults)		gning this		XXX – XXX		. °	heck if I	no SSN 🖵
Part 4: Adult Signature and Contact Information	n – An a	dult hous	sehold m	nember must	sign the appli	icatio	n.	
"I certify (promise) that all information on this application connection with the receipt of Federal funds and that sch false information, my children may lose meal benefits an	ool officia	als may v	erify (che	eck) the inform	nation. I am awa	are th	at if I pu	
Sign here:	Print nar	me:			Day)ate:	
Street Address (if available):		Zip: Daytime Phone:						
Part 5: Children's Ethnic and Racial Identities -								
				dentities:				
Hispanic or Latino				an American			e Hawa	
Not Hispanic or Latino				ian or Alaska		Strier	Pacific	Islander
Do Not Fill Out th Annual Income Conversion: Weekly X 52:		on Belov Every 2 we			Only a month X 24;		Mont	hly X 12
			eks A Zu					
Total Household Size:		Free				enied	d n for der	vial:
		□Income □Catego			e K		come too	
Total Income:per			/TANF/FE			_		e application
Year Month 22 X Mo Every 2 Wks Week		Generation Foster		ant/Runaway:				
				tion Required a	t School)			
Signature of Determining Official:				Da	ate Approved:			
FOR THE VERIFICA	TION PRO	OCESS ON				_		Withdrawn
Signature of Confirming Official:				e Confirmed:			⊢ro	m School:
Signature of Verifying Official:			D	ate Verified:				

Free & Reduced-Price School Meals Family Application – complete one application per household Attachment C: 2024-25

Your children may qualify for free or	FEDERAL INCOME CHART for School Year 2024-25								
reduced-price meals if your household income falls at or below the	Household size	Yearly	Monthly	Twice per Month	Every Two Weeks	Weekly			
limits on this chart.	1	27,861	2,322	1,161	1,072	536			
	2	37,814	3,152	1,576	1,455	728			
	3	47,767	3,981	1,991	1,838	919			
	4	57,720	4,810	2,405	2,220	1,110			
	5	67,673	5,640	2,820	2,603	1,302			
	6	77,626	6,469	3,235	2,986	1,493			
	7	87,579	7,299	3,650	3,369	1,685			
	8	97,532	8,128	4,064	3,752	1,876			
	Each additional person:	9,509	830	415	383	192			

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 are 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.

Non-Discrimination Statement: This explains what to do if you believe you have been treated unfairly.

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online

at: https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted 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: (833) 256-1665 or (202) 690-7442; or
- (3) Email: program.intake@usda.gov

This institution is an equal opportunity provider.

Computing Income for Self-Employed Individuals

Individuals who are self-employed or engaged in farming may experience variations in cash flow and cannot easily report a monthly income. These individuals can use their 2020 U.S. Individual Income Tax Return Form 1040 to report self-employment income for the free and reduced-price meal application. The income to report is income derived from the business venture less operating costs incurred in the generation of that income. Deductions for personal expenses such as interest on home mortgages, medical expenses and other similar non-business items are <u>not</u> allowed in reducing gross business income.

When completing this form, **losses** (negative numbers) reported on any of the lines below are included when determining the **total** self-employed income. If the total income is a negative number, it is to be recorded as zero on the meal application in the column labeled "All Other Income".

Zero income resulting from use of the 1040 Form does not require follow-up.

Important Reminders from the U.S. Individual Income Tax Return Form 1040: Line 1 cannot be used to report current income. Income from wages or salaries must be reported on the application for the most recent month.

Line 9 (Total Income) and line 11 (Adjusted Gross Income) cannot be used for the purpose of applying for free and reduced-price meals.

The five line items listed below are used to determine allowable self-employment income.

From the first page of the U.S. Individual Income Tax Return Form 1040:

Line 7 Capital Gain or (loss)

From the U.S. Individual Income Tax Return Form 1040 – SCHEDULE 1 - under Part 1 - Additional Income:

Line 3 Business Income or (loss)	
Line 4 Other Gains or (losses)	
Line 5 Rental Real Estate, etc.	
Line 6 Farm Income or (loss)	
Total of the above five lines:	 equals annual self-employed income *

* Report this figure on the meal application in the column labeled "All Other Income".

If the total of the above lines is a negative number, it must be changed to zero before it is transferred to the meal application.

NOTE: This form is used only to report income from self-employment and/or farming. If any members of the household have income from other jobs, the gross income from those jobs must be reported on the meal application form.

NE Department of Education – Nutrition Services National School Lunch Program

Sharing Information with Other Programs - Optional

Dear Parent/Guardian:

To save you time and effort, the information you gave on your Free and Reduced-Price School Meals Application may be shared with other programs for which your children may qualify.

For the following programs, we must have your permission to share your information. Sending in this form will not change whether your children get free or reduced-price meals.

Yes! I DO want school officials to share information from my Free and Reduced-Price School Meals Application with *Guidance Counselor for Scholarship Opportunities, including SCC ACE Scholarship info, and PSAT/NMSQT test fee waivers*

Yes! I DO want school officials to share information from my Free and Reduced-Price School Meals Application with Activity Program/Participation Fee Waiver

If you checked "yes" to any or all of the boxes above, complete the following form to ensure that your information is shared for the child(ren) listed below. Your information will be shared only with the programs you checked.

Child's Name:	School:
Child's Name:	School:
Child's Name:	School:
Child's Name:	School:
Signature of Parent/Guardian:	Date:
Printed Name:	
Address:	

For more information, you may call Michele Johnson-Clouse at 402-947-2781, or michele.clouse@friendschool.org Return this form to: Michele Johnson-Clouse, FPS, PO Box 67, Friend NE 68359

Sharing Information with Medicaid/SCHIP - Optional

Dear Parent/Guardian:

If your children get free or reduced-price school meals, they <u>may</u> also be able to get free or lowcost health insurance through Medicaid or the State Children's Health Insurance Program (SCHIP). Children with health insurance are more likely to get regular health care and are less likely to miss school because of sickness.

Because health insurance is so important to children's well-being, *the law allows us to tell Medicaid and SCHIP that your children are eligible for free or reduced-price meals, unless you tell us not to.* Medicaid and SCHIP only use the information to identify children who may be eligible for their programs. Program officials may contact you to offer to enroll your children. Filling out the Free and Reduced-Price School Meals Application does not automatically enroll your children in health insurance.

If you <u>do not</u> want us to share your information with Medicaid or SCHIP, fill out the form below and return it to your child's school. (Sending in this form will not change whether your children get free or reduced-price meals).

No! I DO NOT want information from my Free and Reduced-Price School Meals Application shared with Medicaid or the State Children's Health Insurance Program.

If you checked no, fill out the form below.

Child's Name:	School:
Child's Name:	
Child's Name:	School:
Child's Name:	
Signature of Parent/Guardian:	Date:
Printed Name:	
Address:	

For more information, you may call Michele Johnson-Clouse at 402-947-2781 or email at michele.clouse@friendschool.org

Return this form to: FPS, PO Box 67, Friend NE 68359 by September 25, 2024



Legion Teacher of the Year!!





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