



If your family wishes to request confirmation you could qualify for non-WCSD benefits (fee waivers, free/reduced internet, scholarships, etc.), please complete the following information and return to the School Nutrition Department. You may scan/email to Donna Coleman ([donna.coleman@walton.k12.ga.us](mailto:donna.coleman@walton.k12.ga.us)), fax to 770-266-4437, or use school mail.

Parent/Guardian Name:

Student Name:

School:

Student ID#:

Student DOB:

Parent/Guardian contact information where we'll send a letter stating whether you qualify. Email address (preferred):

Mailing address:

**Complete This Section**

I believe we qualify based on the following (check all that apply):

- My household receives TANF or SNAP or other public assistance
- My household's monthly total income is \$ \_\_\_\_\_ and \_\_\_\_\_ people live in the household.
- My family lives in federally subsidized public housing
- My family is homeless
- My child is a Foster child
- My child is a ward of the state

Parent /Guardian Signature:

Date:

By clicking this box, I affirm that I am the parent/guardian for this student.

For assistance, please call Donna Coleman at 770-266-4431

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