

2022-2023 Free Lunch Program

To apply for Free Lunch, you must complete the Free School Meals Family Application.

In order for the application to be processed, we will need for you to complete the application and provide the required documentation. Please note the **only** approval for Free Lunch is if your family currently receives food stamps. **Please enclose a photo copy of your food stamp card with the Notice of Eligibility from DSS.** Please be sure to include your food stamp card number and case number on the form.

It is important that your child packs or pays for lunch online at www.k12paymentcenter.com until you receive a notification of approval for free lunch.

Please complete one form per family and list all siblings that attend Uwharrie Charter Academy.

You may send documentation to:

Email: christy_sands@uwharriecharter.org

Mail: Uwharrie Charter Academy Central Office
Attn: Christy Sands
5154 US Hwy 220 Business South
Asheboro, NC 27205

Or return to your child's school in a sealed envelope with the Attn: Christy Sands, Central Office

Please allow 2 weeks once received at the Central Office for processing.

Students Name

Grade



2022/2023 FREE SCHOOL MEALS FAMILY APPLICATION

Student Name: _____ Grade: _____

Name of sibling(s) attending UCA: _____ Grade: _____

Name: _____ Grade: _____ Name: _____ Grade: _____

Part 1: TOTAL HOUSEHOLD GROSS INCOME					
Name (List the names of EVERYONE in the household)	Earnings from work before deductions	Welfare, child support, alimony	Pensions, retirement, SS, VA benefits	All other income	Check if NO Income
(Example: Jane Smith)	\$200.50 per month	\$100.75 per month	\$100.45 per month	\$___/___	<input type="checkbox"/>
	\$___per___	\$___per___	\$___per___	\$_per__	<input type="checkbox"/>
	\$___per___	\$___per___	\$___per___	\$_per__	<input type="checkbox"/>
	\$___per___	\$___per___	\$___per___	\$_per__	<input type="checkbox"/>
	\$___per___	\$___per___	\$___per___	\$_per__	<input type="checkbox"/>
	\$___per___	\$___per___	\$___per___	\$_per__	<input type="checkbox"/>

Part 2: BENEFITS

Note: The only approval for Free Lunch is if your family currently receives food stamps. Please enclose a photo copy of your food stamp card with the Notice of Eligibility from DSS. Please be sure to include your food stamp card number and case number.

Name: _____ FNS Card #: _____ Case #: _____

Part 3: HOMELESS, MIGRANT, RUNAWAY CHILDREN

Homeless Migrant Runaway

Part 4: SIGNATURE OF PARENT/GUARDIAN, HOME ADDRESS AND PHONE NUMBER

Print Name: _____ Signature: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Phone Number: _____

OFFICE USE ONLY:

Approved for free meals Denied