

# WARREN COUNTY TECHNICAL SCHOOL DISTRICT

1500 Route 57, Washington, NJ 07882-3538

[www.wctech.org](http://www.wctech.org) 908-689-0122

Dear Parent/Guardian:

Children need healthy meals to learn. The **WARREN CO VOC BD OF ED** offers healthy meals every school day at the prices listed below. **Your children may qualify for free or reduced price meals and Summer EBT benefits.**

|                            | FULL PRICE |        |        | REDUCED PRICE |        |        |
|----------------------------|------------|--------|--------|---------------|--------|--------|
|                            | Elementary | Middle | High   | Elementary    | Middle | High   |
| National School Lunch      | N/A        | N/A    | \$4.75 | N/A           | N/A    | \$0.00 |
| School Breakfast           | N/A        | N/A    | \$3.25 | N/A           | N/A    | \$0.00 |
| After School Snack         | N/A        | N/A    | N/A    | N/A           | N/A    | N/A    |
| Special Milk Program       | N/A        | N/A    | N/A    | N/A           | N/A    | N/A    |
| Split Session Milk Program | N/A        | N/A    | N/A    | N/A           | N/A    | N/A    |
| N/A - Not Applicable       |            |        |        |               |        |        |

This packet includes an application for free or reduced price meal benefits, and a set of detailed instructions. For a convenient way to fill out the meal application, go to <https://www.wctech.org/wcts/Lunch/>.

Below are some common questions and answers to help you with the application process.

1. WHO CAN GET FREE OR REDUCED PRICE MEALS AND SUMMER EBT BENEFITS?
  - All children in households receiving benefits from **NJ SNAP** or **NJ TANF/WorkFirst-NJ**
  - Foster children that are under the legal responsibility of a foster care agency or court
  - Children participating in their school's Head Start program
  - Children who meet the definition of homeless, runaway, or migrant
  - Children may receive free or reduced price meals and Summer EBT benefits if your household's income falls at or below the limits on this chart.

| FEDERAL ELIGIBILITY INCOME CHART<br>For School Year 2025-2026 |         |         |        |
|---------------------------------------------------------------|---------|---------|--------|
| Household Size                                                | Yearly  | Monthly | Weekly |
| 1                                                             | 28,953  | 2,413   | 557    |
| 2                                                             | 39,128  | 3,261   | 753    |
| 3                                                             | 49,303  | 4,109   | 949    |
| 4                                                             | 59,478  | 4,957   | 1,144  |
| 5                                                             | 69,653  | 5,805   | 1,340  |
| 6                                                             | 79,828  | 6,653   | 1,536  |
| 7                                                             | 90,003  | 7,501   | 1,731  |
| 8                                                             | 100,178 | 8,349   | 1,927  |
| Each additional person:                                       | 10,175  | 848     | 196    |

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 and Summer EBT, please call or e-mail your school, homeless liaison or migrant coordinator.
3. DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD? No. Use one School Meals and Summer EBT 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 one of your children's schools.
4. SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE MEALS AND SUMMER EBT? 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 your school immediately.
5. CAN I APPLY ONLINE? If available, you are encouraged to complete an online application instead of a paper application. The online application has the same requirements and will ask you for the same information as the paper application. Contact your school if you have any questions about the online application.
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.
7. I GET WIC. CAN MY CHILDREN GET FREE MEALS AND SUMMER EBT? Children in households participating in WIC may be eligible for free or reduced price meals and Summer EBT. 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 and Summer EBT 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

Hearing Officer Name: Donna Williams Address: 1500 Route 57, Washington, NJ - 07882  
Phone Number: (908)869-6298 Ext:

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 and Summer EBT.
12. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you normally 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 also be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you meant 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, or receive Family Subsistence Supplemental Allowance payments, 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.
16. MY FAMILY NEEDS MORE HELP. ARE THERE ANY OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for NJ SNAP or other assistance benefits, contact your local assistance office, call 1-800-687-9512 or go to [nj.gov/humanservices/njsnap/apply/ways/](http://nj.gov/humanservices/njsnap/apply/ways/). You can also contact NJ FamilyCare or Medicaid at 1-800-701-0710 or [www.njfamilycare.org](http://www.njfamilycare.org) for information regarding health insurance for your family. For the WIC Program, call 1-800-328-3838 or go to [www.nj.gov/health/fhs/wic](http://www.nj.gov/health/fhs/wic).

If you have other questions or need help,  
call (908)869-6298 Ext:

**Sincerely,**

*Signature:*

*Name:* Donna Williams