



Student ID #: _____

School: _____

Dear Parent or Guardian of <Propel Student Name>,

We are pleased to inform you that Propel Charter Schools will continue participation in the Community Eligibility Provision (CEP) for the 2018-2019 school year. This Program is available to schools who are participating in the National School Lunch and School Breakfast Programs.

All enrolled students of Propel Charter Schools participation in CEP are eligible to receive a nutritional breakfast and lunch everyday at no charge to you household.

No further further action is required of you. Your child(ren) will be able to participate in these meal programs without paying a fee or submitting an application.

We're pleased to announce The Nutrition Group as our new meal provider for the 2018-2019 school year. We're working together to offer the students new and exciting breakfast and lunch options.

Students will need to memorize their ID number in order to receive breakfast and/or lunch. At the top of this letter, you will see your child's 6-digit ID number. This number is also available in Skyward ("Other ID"). Please help your student memorize this number before school begins as it will help lunch lines move faster to give your child - and all students - more time to eat. This number will be entered on a pin pad similar to the one on this page. Visualizing the number may help your student to memorize it.

There is one thing we need you to do in order to ensure our continued participation in this needed federal program. Families are requested to complete the enclosed survey and return it to your school August 20 through August 27. All families who return their surveys by the deadline will be entered into a drawing for a \$500 gift card. The school with the highest participation will win an all-school pizza party.

You may choose to complete the survey online via SurveyMonkey or on paper using the survey enclosed. We request that you complete the survey only once using the paper version or the online version. If your email address is saved in Skyward, you will receive a link to the questionnaire in your email from SurveyMonkey. If you don't receive the survey online or if you encounter issues logging into Skyward, please reach out to the Administrative Assistant at your school.

If you have any questions, please feel free to call the Food Service Office at 412-325-7305 Ext. 1290.

We are looking forward to a great year.

Thank you,
Ms. Charise Johnson
Food Service Manager

7	8	9	CLEAR		
4	5	6			
1	2	3	ENTER		
	0				

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Student ID #: _____

School: _____

Propel Schools Family Questionnaire

Instructions: Please check the appropriate box for each question below.
Please have your child return the completed form to his or her homeroom teacher.

Are you receiving assistance under the Temporary Assistance to Needy Families (TANF) program?

- Yes
 No

Are any of your children eligible to receive medical assistance under the Medicaid program?

- Yes
 No

What is the total number of people in your household, including yourself?

- 1
 2
 3
 4
 5
 Other: Please enter number here _____

What is your total **annual** household income from all sources?

- Less than \$22,459
 \$22,450 - \$30,541
 \$30,452 - \$38,443
 \$38,444 - \$46,435
 \$46,436 - \$54,427
 \$54,428 - \$62,419
 Other: Please enter total annual household income here \$ _____

Are the student's parent and/or guardian an active duty member of a branch of the armed forces (Army, Navy, Air Force, Marine Corps, Coast Guard) including fulltime National Guard duty?

- Yes
 No

*This information is confidential and will be used for collecting school-wide household information only.
No personal information is shared outside of Propel Schools.*

Propel Schools

3447 East Carson Street • Pittsburgh, PA 15203 • Phone: 412-325-7305 • Fax: 412-525-7962 • www.propelschools.org