



SCHOOL DISTRICT OF  
**River Falls**



Food Service Office  
River Falls High School  
818 Cemetery Rd.  
River Falls, WI 54022

September 2024 – June 2025

Dear Parents/Guardians:

Welcome! We at the RFSD Food Service Department look forward to serving your family.

### Our Program

As we welcome students back for the 2024-25 school year, we want to remind you about the benefit of school meals, which continue to be some of the healthiest meal options for students. Our mealtimes feature kid-approved foods and are an important part of the learning day.

The Federal Government offers a program to families that provides free or reduced meals based on income guidelines. Families that automatically qualify through direct certification will be notified with a special purple letter mailed to them. Families that do not receive this letter by August 16<sup>th</sup>, 2024 can submit an application online at <https://foodservice.edutrak.com/> after August 16, 2024. This is an easy and confidential way to ensure your child stays well-nourished at school. For families with multiple students in the district, only one household application is needed. If qualified, meal benefits will apply for the entire school year. Applications can also be submitted throughout the year. For families receiving other benefits, such as SNAP or TANF, you may receive notification that your student(s) is/are automatically eligible for free meals and do not need to submit an application.

### Family Accounts

Each family in the district has a food service debit account for making purchases. Each student in that family receives their own PIN to use at checkout, automatically deducting the cost from the account. Your family account covers lunches, breakfasts, snack milks, and à la carte items (for middle and high school students) at all district schools, requiring just one deposit for all your children attending the River Falls School District. Parents/guardians are expected to maintain a positive balance in their account at all times.

### Payment Options

**ONLINE:** Pay online through your EduTrak account at: <https://foodservice.edutrak.com/> Online payments are posted immediately. We utilize the online service EFUNDS for Schools, who will charge a fee of \$1.00 per transaction (checking account) and \$2.65 per \$100 (credit card).

**CASH or CHECK:** Make checks out to RFSD Food Service. Please include the following information with your deposit: head of household, students' names, and amount enclosed. Payments may be mailed to RFHS Food Service, 818 Cemetery Rd. River Falls, WI 54022 or placed in the drop box available at each school's office. Payments delivered to the high school office before 8 a.m. are posted to your account before lunch. Please allow 2 days for posting of deposits made at other schools.

### Checking Your Account Balance

It is your responsibility to regularly check your balance. Call or email us for your current balance or you can check your account balance online. To receive email notification of low balances, complete and return the form provided. Regular letter statements will be mailed *only* to those accounts that have a negative balance.

To access your account online:

For first time setup you will need to register from a computer. After that, other devices may be used. Before calling, please log into the following website: <https://foodservice.edutrak.com/> If you still have questions, contact Rita at 715-425-1800 Ext 3724 - on school days from 6:00am to 2:00pm.

2024-25 School Year Meal Prices

	Elementary School	Middle School/High School
Lunch	\$2.85	\$3.15
Reduced Lunch	\$0.40	\$0.40
Breakfast	\$1.70	\$1.85
Reduced Breakfast	\$0.30	\$0.30
Milk	\$0.55	\$0.55
Kids Club Snack	no charge	N/A

Adult Meal Prices: Lunch - \$4.80, Breakfast - \$3.00

If you have middle or high school students, they have extra ala carte items available for purchase. Discuss with them how much they may spend on these items. If you do not want your students to be able to purchase ala carte items with your family account please call our office at 715-425-1800 ext.3724. Ala carte items may also be purchased with cash.

Special Dietary Needs

Any student requesting a special dietary exception from food service will need to have on file, a current written doctor's note. This will be kept by the onsite nurse and with the onsite food service. Contact [patrick.knox@rfsd.k12.wi.us](mailto:patrick.knox@rfsd.k12.wi.us) with questions.

Negative Balances and Service Suspension

It is expected that a positive balance will be maintained in each food service account at all times.

Families who have signed up will be notified by an automatic email/calling system on weekday evenings between 5:30 p.m. and 8:30 p.m of a low (\$15.00) account balance. Students and staff will also be informed of low account balances in the lunch line. Students will not be allowed to purchase extra portions, ala carte items, or extra milk using their account when the account reaches a \$0 balance. Warning letters are mailed once a month to those families who have negative balance. Students who are entitled to free meals will not be denied a meal, nor given an alternative meal.

If you are having difficulties with account payments, call us. Reduced price and free meals are available to those who qualify. These benefits are provided confidentially. If you wish to apply, please do so through our EduTrak link @ <https://foodservice.edutrak.com/> The portal will open for the upcoming school year August 16, 2024.

Please feel free to contact us with any questions you may have at 715-425-1800 ext. 3724 or e-mail us at [rita.turner@rfsd.k12.wi.us](mailto:rita.turner@rfsd.k12.wi.us).

Sincerely,

Pat Knox  
Director of Dining Services

PK:rt

# FREE/REDUCED ONLINE APPLICATION

## INSTRUCTIONS

Applications will be accepted beginning **August 16, 2024**

Dear Parent/Guardian,

Online Free/Reduced Applications will be accepted beginning **August 16, 2024.**

DO I NEED TO APPLY or REAPPLY?

- If you have been Direct Certified by the State of Wisconsin, you will have gotten a letter confirming that free or reduced status (printed on purple paper) **between August 9, 2024 and August 16, 2024.** Families who received that letter **DO NOT** have to complete another application, as your status is determined.
- All other parents who have not received this Direct Certification letter (printed on purple paper), must reapply yearly.

### **To fill out the Online Meal Benefit Application:**

For the 2024-2025 school year, online free/reduced meal applications will be done through the EduTrak family site: <https://foodservice.edutrak.com/>



### Welcome back!

Log in to begin managing your account

Username

This is typically your email address.

Password

Trouble logging in! [Login Assistance](#)

Sign In

Don't have an account yet?

[Click here to begin our setup process](#)

To access the free/ reduced application, you must first create an account on the Wordware family site, if you have not already done so. If you already have a family account on the Wordware site but have forgotten your password, go to [lobby.wordwareinc.com](https://lobby.wordwareinc.com) and click on "Login Assistance" then click on "I forgot my password" to get a new password emailed to you. ***If you have NOT already created a family account on the Wordware site, a Family Key Letter is included in this mailing. The letter has instructions to help you get your account set up.***

1. Access your Wordware account here: <https://lobby.wordwareinc.com>.
2. Enter your username and password.
2. Click on the orange GO button by the knife/fork icon.
3. Click on the Blue "Apply for free/reduced benefits" button.
4. Click on the blue "Get Started" button
5. Fill out your information and submit your form.

Account Number 1439044	Parent Name Karen Fay	Family Users karen@myglobaldata.com <a href="#">Add a family user</a>	SCHOOL DISTRICT OF RIVER FALLS FOOD SERVICE 818 Cemetery Road River Falls, WI 54022
Meal Balance 0	Family ID / Family Account ID 4535 / 1439044	Notifications are OFF <a href="#">Change Notification Settings</a>	Lunch Contact Rita Turner (715) 425-1830
<a href="#">Add Funds</a>	Family Members Sample Student		
<a href="#">Show Transactions</a>	Parent Address 3600 WEST LANE WEST, MN 55555		
<a href="#">Auto-Refill Options</a>			

**Apply for Free/Reduced Benefits**

No computer access? Contact Rita at 715-425-1800 x3724 or [rita.turner@rfsd.k12.wi.us](mailto:rita.turner@rfsd.k12.wi.us)

If you have other questions or need help, contact:

Rita, 715-425-1800 x3724 or [rita.turner@rfsd.k12.wi.us](mailto:rita.turner@rfsd.k12.wi.us)

Si necesita ayuda, por favor llame al telefono: 715-425-1800 x 3724

Si vous voudriez d'aide, contactez nous au numero: 715-425-1800 x 3724

## FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED PRICE SCHOOL MEALS FOR SCHOOL YEAR 2024-25

Dear Parent/Guardian:

Children need healthy meals to learn. River Falls School District offers healthy meals every school day. Elementary Breakfast costs **\$1.70**; lunch costs **\$2.85**. Middle and High School Breakfast costs **\$1.85**; lunch costs **\$3.15**. Your children may qualify for free meals or for reduced price meals. Reduced price is **\$0.30** for breakfast and **\$0.40** for lunch. This packet includes an application for free or reduced price meal benefits, and a set of detailed instructions. 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 FoodShare, the Food Distribution Program on Indian Reservations (FDPIR), or W-2 cash benefits are eligible for free meals, when listed on the application.
- **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 qualify to receive free or reduced price meals if your household's income is at or below the limits on the Federal Income Eligibility Guidelines.

FEDERAL ELIGIBILITY INCOME CHART For School Year 2024-25			
Household size	Yearly (\$)	Monthly (\$)	Weekly (\$)
1	27,861	2,322	536
2	37,814	3,152	728
3	47,767	3,981	919
4	57,720	4,810	1,110
5	67,673	5,640	1,302
6	77,626	6,469	1,493
7	87,579	7,299	1,685
8	97,532	8,128	1,876
Each additional person:	9,953	830	192

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 have not been told your children will get free meals, contact us at 715-425-1800 ext. 1115 or e-mail us at [mark.inouye@rfsd.k12.wi.us](mailto:mark.inouye@rfsd.k12.wi.us)
3. 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. The link for applications can be found here. If you do not have access to a computer or internet service we can help. contact us at 715-425-1800 ext. 3724 or e-mail us at [rita.turner@rfsd.k12.wi.us](mailto:rita.turner@rfsd.k12.wi.us) to make an appointment.
4. SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE OR REDUCED PRICE MEALS? Please read the letter you received carefully and follow the instructions. If your letter indicated you qualify for free meals, then no application is needed. If any children in your household were missing from your eligibility notification, Contact Rita Turner, 715-425-1800 ext. 3724 or e-mail us at [rita.turner@rfsd.k12.wi.us](mailto:rita.turner@rfsd.k12.wi.us) immediately. If your household was notified it qualified for reduced price meals, we encourage you to complete an application to potentially qualify for free meals based on household size and income.
5. DO I NEED TO FILL OUT AN APPLICATION IF MY CHILD ATTENDS A COMMUNITY ELIGIBILITY PROVISION (CEP) SCHOOL? **If your child attends a school that participates in CEP,** receipt of free breakfast and lunch meals does not depend on returning this application. However, this information is necessary for other programs and may be used to determine if your household is eligible for additional benefits.
6. CAN I APPLY ONLINE? Yes! You are encouraged to complete an online application instead of a paper application if you are able. The online application has the same requirements and will ask you for the same information as the paper application. Visit <https://foodservice.edutrak.com/> to begin or to learn more about the online application process. Contact Rita Turner, 715-425-1800 ext. 3724 or e-mail us at [rita.turner@rfsd.k12.wi.us](mailto:rita.turner@rfsd.k12.wi.us) **if you have any questions about the application process.**
7. 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, through **October 15 2024,** or when a new eligibility is determined. You must submit a new application unless the school told you that your child is eligible for the new school year. If you do not submit 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.

8. I GET WIC. CAN MY CHILDREN GET FREE MEALS? Children in households participating in WIC may be eligible for free or reduced price meals, but it is based on income. Please submit an application.
9. MY CHILD PARTICIPATES IN BADGERCARE PLUS OR MEDICAID. CAN MY CHILD GET FREE MEALS? Children participating in Badgercare Plus or Medicaid may be eligible for free or reduced price meals, but it is based on income. Please submit an application.
10. WILL THE INFORMATION I GIVE BE CHECKED? Yes. We may also ask you to send written proof of the household income you report.
11. 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 or experience a financial hardship may become eligible for free and reduced price meals if the household income drops below the income limit.
12. 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 emailing Mark Inouye 715-425-1800 ext. 1115 or [mark.inouye@rfsd.k12.wi.us](mailto:mark.inouye@rfsd.k12.wi.us)
13. 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.
14. 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.
15. 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.
16. 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. Do not include any combat pay resulting from deployment as income.
17. WHAT IF THERE IS NOT 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.
18. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for FoodShare or other assistance benefits, contact your local assistance office or call 1-800-362-3002.
19. IF THIS APPLICATION IS APPROVED WILL MY CHILD RECEIVE SUMMER EBT BENEFITS? Yes. **Summer EBT:** If your child(ren) qualify for free or reduced price meals this school year, they are also eligible to receive Summer EBT benefits for this upcoming summer. Summer EBT provides funds for each eligible child to help with costs of food during the summer months. To learn more about this program, to update your contact information, or to opt out of receiving these benefits visit [Summer EBT Benefit Management](https://dpi.wi.gov/school-nutrition/programs/SummerEBT). <https://dpi.wi.gov/school-nutrition/programs/SummerEBT>

If you have other questions or need help, call 715-425-1800 ext. 3724 or e-mail us at [rita.turner@rfsd.k12.wi.us](mailto:rita.turner@rfsd.k12.wi.us)

## **HOW TO APPLY FOR FREE AND REDUCED PRICE SCHOOL MEALS**

Please use these instructions to help you fill out the application for free or reduced price school meals. You only need to submit one application per household, even if your children attend more than one school in River Falls School District. The application must be filled out completely to certify your children for free or reduced price school meals. Please follow these instructions in order. If at any time you are not sure what to do next, please contact Rita Turner, 715-425-1800 ext. 3724 or e-mail us at [rita.turner@rfsd.k12.wi.us](mailto:rita.turner@rfsd.k12.wi.us). *If your child attends a Community Eligibility Provision School (CEP), receipt of free breakfast and lunch meals does not depend on returning this application; however, this information is necessary for other programs.*

PLEASE USE A PEN (NOT A PENCIL) WHEN FILLING OUT THE APPLICATION AND DO YOUR BEST TO PRINT CLEARLY.

## STEP 1: LIST ALL HOUSEHOLD MEMBERS WHO ARE INFANTS, CHILDREN, AND STUDENTS UP TO AND INCLUDING GRADE 12

Tell us how many infants, children, and school students live in your household. They do NOT have to be related to you to be a part of your household.

**Who should I list here?** When filling out this section, please include ALL members in your household who are:

- Children grades 12 or under AND are supported with the household's income; and
- In your care under a foster arrangement, or qualify as homeless, migrant, or runaway youth, or enrolled in a Head Start program.

### A) List each child's name.

Print each child's name. Use one line of the application for each child. When printing names, write one letter in each box. Stop if you run out of space. If there are more children in household than lines on the application, attach a second piece of paper with all required information for the additional children.

### B) Enter the grade and the name of the school the child attends or mark n/a if not in school.

### C) Do you have any foster children?

If any children listed are foster children, mark the "Foster Child" box next to the children's names. If you are ONLY applying for foster children, after finishing **STEP 1**, go to **STEP 4**.  
Foster children who live with you may count as members of your household and should be listed on your application. If you are applying for both foster and non-foster children, go to step 3.

### D) Are any children homeless, migrant, runaway or enrolled in a Head Start program?

If you believe any child listed in this section meets this description, mark the "Homeless, Migrant, Runaway or Head Start" box next to the child's name and complete all steps of the application.

## STEP 2: DO ANY HOUSEHOLD MEMBERS CURRENTLY PARTICIPATE IN FoodShare, W-2 Cash Benefits OR FDPIR?

If anyone in your household (including you) currently participates in one or more of the assistance programs listed below, your children are eligible for free school meals:

- The Supplemental Nutrition Assistance Program (SNAP) or FoodShare.
- Temporary Assistance for Needy Families (TANF) or W-2 Cash Benefits.
- The Food Distribution Program on Indian Reservations (FDPIR).

### A) If no one in your household participates in any of the above listed programs:

- Leave **STEP 2** blank or check "No" and go to **STEP 3**.

### B) If anyone in your household participates in any of the above assistance programs:

- Write a case number and name of the assistance program you or any member of the household participates in for FoodShare, W-2 Cash Benefits, or FDPIR. You only need to provide one case number. If you participate in one of these programs and do not know your case number, contact your case worker. Medicaid and BadgerCare case numbers do NOT qualify for free or reduced price meals.
- Go to **STEP 4**.

## STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

### How do I report my income?

- Use the charts titled "Sources of Income for Children" and "Sources of Income for Adults," printed on the back side of the application form, to determine if your household has income to report.
- Report all amounts in GROSS INCOME ONLY. Report all income in whole dollars. Do not include cents. Gross income is the total income received before taxes. Many people think of income as the amount they "take home" (listed as "net pay" on paycheck stub) and not the total, "gross" amount. Make sure that the income you report on this application has NOT been reduced to pay for taxes, insurance premiums, or any other amounts taken from your pay.
- Write a "0" in any fields where there is no income to report. Any income fields left empty or blank will also be counted as a zero. If you write '0' or leave any fields blank, you are certifying (promising) that there is no income to report. If local officials suspect that your household income was reported incorrectly, your application will be investigated.
- Mark how often each type of income is received using the boxes to the right of each field.

### 3.A. REPORT INCOME EARNED BY CHILDREN

**A) Report all income earned or received by children.** Report the combined gross income for ALL children listed in STEP 1 in your household in the box marked "Child Income." Only count foster children's personal income if you are applying for them together with the rest of your household.

**What is Child Income?** Child income is money received from outside your household that is paid DIRECTLY to your children. Many households do not have any child income.

## STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

### 3.B. REPORT INCOME EARNED BY ADULTS

#### List adult household members' names.

- Print the name of each household member in the boxes marked "Name of Adult Household Members (First and Last)." When filling out this section, please include ALL adult members in your household who are living with you and share income and expenses, even if they are not related and even if they do not receive income of their own.
- **Do NOT include:**
  - People who live with you but are not supported by your household's income AND do not contribute income to your household.
  - Infants, children and students already listed in **STEP 1.**

**C) Report earnings from work.** Report all total **gross** income (before taxes) from work in the "Earnings from Work" field on the application. This is usually the money received from working at jobs. If you are a self-employed business or farm owner, you will report your net income.

**What if I am self-employed?** Report income from that work as a net amount. This is calculated by subtracting the total operating expenses of your business from its gross receipts or revenue.

**D) Report income from public assistance/child support/alimony/SSI/VA benefits.** Report all income that applies in the "Public Assistance/Child Support/Alimony" field on the application. Do not report the cash value of any public assistance benefits NOT listed on the chart. If income is received from child support or alimony, only report court-ordered payments. Informal but regular payments should be reported as "other" income in the next part.

**E) Report income from pensions/retirement/all other income.** Report all income that applies in the "Pensions/Retirement/Social Security/All Other Income" field on the application.

**F) Fluctuating Income. For seasonal workers and others whose income fluctuates and usually earn more money in some months than others. In these situations, project the annual rate of income and report that. This includes workers with annual employment contracts but may choose to have salaries paid over a shorter period of time; for example, school employees.**

**G) Report total household size.** Enter the total number of household members in the field "Total Household Members (Children and Adults)." This number **MUST** be equal to the number of household members listed in **STEP 1** and **STEP 3**. If there are any members of your household that you have not listed on the application, go back and add them. It is very important to list all household members, as the size of your household affects your eligibility for free and reduced price meals.

**H) Provide the last four digits of your Social Security Number (SSN).** An adult household member must enter the last four digits of their SSN in the space provided. You are eligible to apply for benefits even if you do not have a SSN. If no adult household members have a SSN, leave this space blank and mark the box to the right labeled "Check box if no SSN."

## STEP 4: CONTACT INFORMATION AND ADULT SIGNATURE

**An adult member of the household must sign the application. By signing the application, that household member is promising that all information has been truthfully and completely reported. Before completing this section, please also make sure you have read the privacy and civil rights statements on the back of the application.**

**A) Provide your contact information.** Write your current address in the fields provided if this information is available. If you have no permanent address, this does not make your children ineligible for free or reduced price school meals. Sharing a phone number, email address, or both is optional, but helps us reach you quickly if we need to contact you.

**B) Print or sign your name.** The adult filling out the application must print or sign their name in the signature box.

**C) Return completed form to:**  
**River Falls High School**  
**c/o Rita Turner**  
**818 Cemetery Road**  
**River Falls WI 54022**

**D) Share children's racial and ethnic identities (optional).** On the back of the application, we ask you to share information about your children's race and ethnicity. This field is optional and does not affect your children's eligibility for free or reduced price school meals.

## ADMINISTRATIVE PROCEDURE

### SCHOOL DISTRICT OF RIVER FALLS

River Falls, Wisconsin 54022

763-AP

## FOOD SERVICE MONEY COLLECTION AND ACCESS

### Food Service Program

The School District of River Falls participates in the National School Lunch/Breakfast Program and is committed to serving nutritious, high quality and affordable meals that appeal to children and teenagers. Meals are planned and prepared to meet the Dietary Guidelines for Americans emphasizing less fat, saturated fat, sodium and sugar.

The District, in accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, shall not discriminate 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.

### Procedures

The River Falls School District uses an automated lunch accounting system to record payments and purchases for family accounts. This is a debit system, similar to a checking account. The account holder or parent/guardian is expected to maintain a positive balance in the food service account at all times, so that there is sufficient money in the account for the student to make a purchase.

The parent/guardian is responsible for monitoring the funds in their account. They will receive low balance email and phone notifications of their account. They have the ability to check the status of their account online. They may also contact our office to request account information.

At the end of the school year, any balance, positive or negative, shall be carried over to the next year. Refunds shall be issued, upon request, to families who will no longer have students attending school.

Free or reduced price meal applications are available online any time during the school year to anyone who feels that the financial condition of their family is such that they cannot afford to pay the cost of a school meal.

### Low and Insufficient Account Balances

It is expected that a positive balance will be maintained in each food service account at all times.

Families with a low (\$15.00 or less) account balance will be notified by an automatic email/calling system. Students and staff will also be informed of low account balances in the lunch line.

Students will not be allowed to purchase extra portions, ala carte items, or extra milk using their account when the account reaches a \$0 balance.

Warning letters will be mailed once a month to those families who have a negative balance of -\$50.00 or more asking to pay the balance in full or arrange a payment plan with the district.-

Building principals will be informed of families in their respective buildings who will be receiving this mailing. Building principals will be asked for assistance in resolving each situation.

In accordance with USDA regulations, second meals, ala carte or milks are charged at the full price, and families must maintain a positive balance to make these purchases.

Families in need will be encouraged to complete the Free/Reduced meal application. Balances incurred prior to application approval will be waived.

#### Uncollected Balances

Administrators are expected to protect taxpayers of the district by making a reasonable effort to collect all delinquent food service charges. The school board authorizes administrators to collect food service charges that are 60 days delinquent through legal means including but not limited to small claims court or use of a collection agency. Costs for collection services will be added to the family account.

CROSS REF.: Policy 343.11 Wellness  
Policy 761 Free and Reduced Price Meals

APPROVED: April 2, 2003  
February 23, 2011  
October 23, 2014  
January 15, 2015  
July 18, 2023

## NON-DISCRIMINATION STATEMENT

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/ad-3027.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; or
2. **fax:**  
(833) 256-1665 or (202) 690-7442; or
3. **email:**  
[Program.Intake@usda.gov](mailto:Program.Intake@usda.gov)

This institution is an equal opportunity provider.

12/09/2022

**Para todos los demás programas de asistencia de nutrición del FNS, agencias estatales o locales y sus subreceptores, deben publicar la siguiente Declaración de No Discriminación:**

De acuerdo con la ley federal de derechos civiles y las normas y políticas de derechos civiles del Departamento de Agricultura de los Estados Unidos (USDA), esta entidad está prohibida de discriminar por motivos de raza, color, origen nacional, sexo (incluyendo identidad de género y orientación sexual), discapacidad, edad, o represalia o retorsión por actividades previas de derechos civiles.

La información sobre el programa puede estar disponible en otros idiomas que no sean el inglés. Las personas con discapacidades que requieren medios alternos de comunicación para obtener la información del programa (por ejemplo, Braille, letra grande, cinta de audio, lenguaje de señas americano (ASL), etc.) deben comunicarse con la agencia local o estatal responsable de administrar el programa o con el Centro TARGET del USDA al (202) 720-2600 (voz y TTY) o comuníquese con el USDA a través del Servicio Federal de Retransmisión al (800) 877-8339.

Para presentar una queja por discriminación en el programa, el reclamante debe llenar un formulario AD-3027, formulario de queja por discriminación en el programa del USDA, el cual puede obtenerse en línea en: <https://www.fns.usda.gov/sites/default/files/resource-files/usdaprogram-discrimination-complaint-form-spanish.pdf>, de cualquier oficina de USDA, llamando al (866) 632-9992, o escribiendo una carta dirigida a USDA. La carta debe contener el nombre del demandante, la dirección, el número de teléfono y una descripción escrita de la acción discriminatoria alegada con suficiente detalle para informar al Subsecretario de Derechos Civiles (ASCR) sobre la naturaleza y fecha de una presunta violación de derechos civiles. El formulario AD-3027 completado o la carta debe presentarse a USDA por:

- (1) **correo:**  
U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW Washington, D.C. 20250-9410; or
- (2) **fax:**  
(833) 256-1665 o (202) 690-7442; o
- (3) **correo electrónico:**  
[program.intake@usda.gov](mailto:program.intake@usda.gov)

Esta entidad es un proveedor que brinda igualdad de oportunidades.

### Email Notification Request

If you would like to be notified by email and phone when your family lunch account balance is getting low, please fill in this form and mail it to RHFS Food Service, 818 Cemetery Rd, River Falls WI 54022 or drop it in the deposit box at your child's school. If you used the notification system last year and there is no change in your information, you do not have to submit a new form.

Please submit only ONE FORM per family. Please print clearly.

Parent/Guardian \_\_\_\_\_ Telephone \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email Address \_\_\_\_\_

City,State,Zip \_\_\_\_\_ (required for notification)

Only one email address can be used

Student names/grades/schools

---

---

---

---

---

---

---