



## Learning & Achievement Academy

Announces its policy for 2024-2025

Free and Reduced-Price Meals for students under the

### **NATIONAL SCHOOL LUNCH AND BREAKFAST PROGRAMS**

Any interested person may review a copy of the policy by contacting:

Sherry Amos  
Director  
1040 W King St  
Cocoa FL 32922  
321-594-6115

Household size and income criteria will be used to determine eligibility. An application can not be approved unless it contains complete eligibility information. Once approved, meal benefits are good for an entire year. You need not notify the organization of changes in income and household size.

Only one Free and Reduced application is required per family. For your convenience, you may apply on-line at [www.laboysacademy.org](http://www.laboysacademy.org). The information provided on the application will be used for the purpose of determining eligibility and may be verified at any time during the school year. Applications may be submitted at any time during the year.

Households that receive SNAP (Supplemental Nutrition Assistance Program) or TANF (Temporary Assistance for Needy Families) are required to list on the application only the child's name, SNAP/TANF case number, and signature of adult household member.

Foster children will receive free benefits regardless of the child's personal income or the income of the household. However, **an application must be submitted** to FNS.

Households with children who are considered migrants, homeless, or runaway should contact the **Sherry Amos at (321) 594-6115 for referral to another contact.**

For the purpose of determining household size, deployed service members are considered a part of the household. Families should include the names of the deployed service members on their application. Report only that portion of the deployed service member's income made available to them or on their behalf to the family. Additionally, a housing allowance that is part of the Military Housing Privatization Initiative is not to be included as income.

All other households must provide the following information listed on the application:

- Total household income listed by gross amount received, type of income (e.g., wages, child support, etc.) and how often the income is received by each household member;
- Names of all household members – check the "no income" box if applicable; if household member is a child, list school name for each;
- Signature of an adult household member certifying the information provided is correct; and
- Social security number of the adult signing the application or the word "NONE" for this household member if he or she does not have a social security number.

If a household member becomes unemployed or if the household size changes, food services should be contacted. Children of parents or guardians who become unemployed should also contact food services.

Under the provisions of the Free and Reduced-Price meal policy, Sherry Amos, Director, and the designated Confirming Official will review applications and determine eligibility. If a parent or guardian is dissatisfied with the ruling of the official, he or she may wish to discuss the decision with the determining official on an informal basis. If the parent wishes to make a formal appeal, he or she may make a request either orally or in writing to

**Mrs. Sherry Amos, Director**  
**1040 W King St**  
**Cocoa, FL 32922**

upon which they will be referred to a State Agency Hearing Official (or equivalent) to make final determination.

Unless indicated otherwise on the application, the information on the Free and Reduced-Price Meal application may be used by the school system in determining eligibility for other educational programs.

**FLORIDA INCOME ELIGIBILITY GUIDELINES  
FOR FREE AND REDUCED-PRICE MEALS**

*Effective from July 1, 2024 to June 30, 2025*

<b>FREE MEAL SCALE</b>					
Household Size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	19,578	1,632	816	753	377
2	26,572	2,215	1,108	1,022	511
3	33,566	2,798	1,399	1,291	646
4	40,560	3,380	1,690	1,560	780
5	47,554	3,963	1,982	1,829	915
6	54,548	4,546	2,273	2,098	1,049
7	61,542	5,129	2,565	2,367	1,184
8	68,536	5,712	2,856	2,636	1,318
For each additional family member, add	+ 6,994	+ 583	+ 292	+ 269	+ 135

<b>REDUCED-PRICE MEAL SCALE</b>					
Household Size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	27,861	2,322	1,161	1,072	536
2	37,814	3,152	1,576	1,455	728
3	47,767	3,981	1,991	1,838	919
4	57,720	4,810	2,405	2,220	1,110
5	67,673	5,640	2,820	2,603	1,302
6	77,626	6,469	3,235	2,986	1,493
7	87,579	7,299	3,650	3,369	1,685
8	97,532	8,128	4,064	3,752	1,876
For each additional family member, add	+ 9,953	+ 830	+ 415	+ 383	+ 192

To determine annual income:

- If you receive the income every week, multiply the total gross income by 52.
- If you receive the income every two weeks, multiply the total gross income by 26.
- If you receive the income twice a month, multiply the total gross income by 24.
- If you receive the income monthly, multiply the total gross income by 12.

Remember: The total income before taxes, social security, health benefits, union dues, or other deductions must be reported.

**"The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules."**

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, 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, audiotope, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARC ET 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:

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

This institution is an equal opportunity provider.