COLORADO
CHARTER SCHOOL INSTITUTE

For the 2026-2027 School Year Colorado Charter School Institute will provide no-cost provide no-cost lunch (and breakfast depending on your school) for all students.

Research shows students perform better at school when they are not hungry. By providing **breakfast and lunch** to all no students at no cost, we better support their learning.

Although all students will receive no-cost meals, it's still important for households to provide their income information when requested. Gathering this information allows Colorado Charter School Institute to receive the state and federal funding we qualify for. These funds go directly to schools to help cover the cost of meals and support after-school activities and other nutritional programs for students. Plus, qualifying households may be eligible for Summer EBT benefits, receive discounted school fees, class materials, bus passes, utilities support, and more. **Providing household income information ensures you and your school receive all available financial support.**

This packet contains more information and the form to provide your household income information. While the following pages may reference eligibility for free or reduced-price school meals, lunch (and breakfast depending on your school) will be provided free to all students regardless of household income.

Our school meals follow U.S. Department of Agriculture guidelines for healthy school meals. You can be confident your children are getting quality school meals while saving your family time and money.

For information on how to apply, please read the attached letter.

COLORADO
CHARTER SCHOOL INSTITUTE

Information about Applying for Free or Reduced-Price School Meals

Dear Parent/Guardian:

Children need healthy meals to learn. **Colorado Charter School Institute** will offer lunch (and breakfast depending on your school) to all students at no cost.

This packet includes an application for free or reduced-price meal benefits and instructions. You can also find applications at **your school's front office** or apply online at **www.schoolcafe.com** **Regardless of the determination, all students will receive these no-cost meals. However, this information is important to help ensure that eligible schools and families receive state and federal support.**

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

1. WHO QUALIFIES FOR FREE OR REDUCED-PRICE MEALS UNDER FEDERAL GUIDELINES?
   a. All children in households receiving benefits from the Supplemental Nutrition Assistance Program (SNAP), the Food Distribution Program on Indian Reservations (FDPIR), Medicaid or Temporary Assistance for Needy Family (TANF/Colorado Works – Basic Cash Assistance or State Diversion), are eligible for free meals.
   b. Foster children under the legal responsibility of a foster care agency or court are eligible for free meals. Foster children may be added as a household member of the foster family if the foster family chooses to apply. Including foster children as household members may help other children qualify for benefits. If the foster family is not eligible, it does not prevent a foster child from receiving benefits.
   c. Children who qualify for their district's Head Start program are eligible for free meals.
   d. Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
   e. Children may receive free or reduced-price meals if their household's income is within the limits of the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced-price meals if your household income falls at or below the limits on this chart.

FEDERAL ELIGIBILITY INCOME CHART For School Year 2026 – 2027			
Household size	Yearly	Monthly	Weekly
1	$29,526	$2,461	$568
2	$40,034	$3,337	$770
3	$50,542	$4,212	$972
4	$61,050	$5,088	$1,175
5	$71,558	$5,964	$1,377
6	$82,066	$6,839	$1,579
7	$92,574	$7,715	$1,781
8	$103,082	$8,591	$1,983
Each additional person:	$10,508	$876	$203

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 any of these descriptions and have not already been notified that your children will receive free meals, please call or e-mail **maggienecaise@csi.state.co.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. Return the completed application to: **your schools kitchen/nutrition manager**

4. SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE MEALS? No, but please read the letter you received carefully and follow the instructions. If any children in your household are missing from your eligibility notification, contact **maggienecaise@csi.state.co.us i**mmediately.

5. 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 **www.schoolcafe.com** to begin or to learn more about the online application process. **Maggie Necaise, (720) 626-2648 or maggienecaise@csi.state.co.us** 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 valid for that school year and for the first 30 days of this school year. You must send in a new application unless the school notified you that your child is eligible for the new school year.

7. I RECEIVE WIC. CAN MY CHILDREN RECEIVE FREE MEALS? Children in households participating in WIC may be eligible for free or reduced-price meals. Please send in a completed free and reduced-price school meal application to determine free or reduced-price eligibility.

8. WILL THE INFORMATION I GIVE BE CHECKED? You may be selected to provide written proof of the household income you report on the application.

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 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 school officials. You also may ask for a hearing by calling or writing to: **Ilene Agustin, (720)765-2981 or ileneagustin@csi.state.co.us**

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. Immigration, migrant, citizenship or refugee status is not required to be provided during the application process, and families should continue to apply for free or reduced-price school meals. The application does require the last four numbers of a Social Security number or an indication that there is no Social Security number. Social Security number information is not reported to any organization outside of Colorado Charter School Institute.

12. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you normally receive. For example, if you normally make $1,000 each month, but you missed some work last month and only made $900, put down that you made $1,000 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. The last four digits of the Social Security Number of an adult household member (or an indication of "none") is required to process a complete income application.

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. The last four digits of the Social Security Number of an adult household member (or an indication of "none") is required to process a complete income application.

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. Contact **Maggie Necaise, (720) 626-2648 or maggienecaise@csi.state.co.us** to receive a second application.

16. **MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR?** To find out how to apply for other assistance benefits, contact your local assistance office. Colorado PEAK is an online service to screen and apply for medical, food and cash assistance programs. It can be accessed at https://co.colorado.gov/colorado-peak.

If you have other questions or need help, contact **Maggie Necaise, (720) 626-2648 or maggienecaise@csi.state.co.us**

Sincerely,
Maggie Necaise

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/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.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

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2026 Application for Free/Reduced-Price School Meals & Family Economic Data Survey

Colorado Charter School Institute

www.schoolcafe.com

Complete one application per household. Use a black or blue pen (NOT a pencil). See the Step-By-Step Instructions for more **information.** Some schools in our district participate in the Community Eligibility Provision (CEP) and some do not. The purpose of this form is to determine eligibility for meal benefits for students in non-CEP schools. For students in CEP schools, the information will be used to determine eligibility for other types of benefits.

STEP 1: List all infants, children and students through grade 12 (If you need more space, attach an additional sheet)

Child First Name	MI	Child Last Name	Birth Date (MM/DD/YY)	Grade	Foster Child	Runaway	Homeless	Migrant

Check all that apply. Refer to instructions for info on categories.

Do any household members receive SNAP, TANF/CO Works, or FDPIR benefits? If **YES**, list case number and go to STEP 3 Case # If **NO**, go to STEP 2.

STEP 2: Report income for all household members, including students

List all adults in your household. Report their **total gross income**. If an adult does not have income, write zero (0). Add students in your home that receive income. See instructions for more information.

First and last name of household members	Earnings from work	Weekly	Every 2 Weeks	Twice a Month	Monthly	Annually	Public Assistance/ Child Support/ Alimony	Weekly	Every 2 Weeks	Twice a Month	Monthly	Annually	Pensions/ Retirement/All other income	Weekly	Every 2 Weeks	Twice a Month	Monthly	Annually
	$						$						$					
	$						$						$					
	$						$						$					
	$						$						$					
	$						$						$					

Total Number of Household Members (All children and adults that live in your home)

Last four digits of Social Security Number. Not required for CEP schools or Summer EBT.

Check box if no Social Security Number

STEP 3: Signature and Contact Information.

"I certify my children are not receiving Summer EBT benefits in another state or Indian Tribal Organization. I certify (promise) that all information on this application is true, and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and that school officials may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws."

Mailing Address or PO Box | City | State | Zip Code | Email Address

Home or Cell Phone Number | SIGNATURE of Adult Household Member (Required)

Printed First and Last Name of Signer | Today's Date

Continue to page 2

STEP 4: Release of Information

The details you give on this form will be used with state educational programs and may be shared with Medicaid or State Children's Health Insurance Program (SCHIP) offices.

☐ **DO NOT** share information with Medicaid/SCHIP

Share my information with the following programs I've checked:

☐ Advanced Placement (AP) Exam and/or AP Book Fees ☐ School Officials for School Fees

☐ Accelerate College Opportunity Exam and/or Book Fees ☐ List Specific Program

Return completed application to: Colorado Charter School Institute, 1525 Sherman St, B76, Denver, CO 80203

OPTIONAL: Children's Ethnic and Racial Identities

We are required to ask for information about your children's race and ethnicity. Responding is optional and does not affect your children's eligibility for free or reduced-price meals.

Ethnicity: (check one): ☐ Hispanic or Latino ☐ Not Hispanic or Latino

Race (check one or more): ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White

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 submit all needed information, we cannot approve your child for free or reduced price meals or Summer EBT. You must include the last four digits of the social security number of the primary wage earner or other adult household member who signs the application. The social security number is not required when you apply for Summer EBT or 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 (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.bvTo 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/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.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. This institution is an equal opportunity provider.

DISTRICT USE ONLY. DO NOT WRITE BELOW THIS LINE.

Annual Income Conversion: Weekly x 52; Bi-Weekly x 26; 2 Times per month x 24; Monthly x 12

Application Type

☐ Total Household Income: $ _____ Household Size _____

Household Income Frequency ☐ Weekly ☐ Every Two Weeks ☐ Twice a Month ☐ Monthly ☐ Annually

☐ **Categorical Eligibility**

☐ SNAP ☐ FDPIR ☐ TANF ☐ Foster ☐ Homeless/Migrant/Runaway/Head Start

Application Status

Approved ☐ Free ☐ Reduced

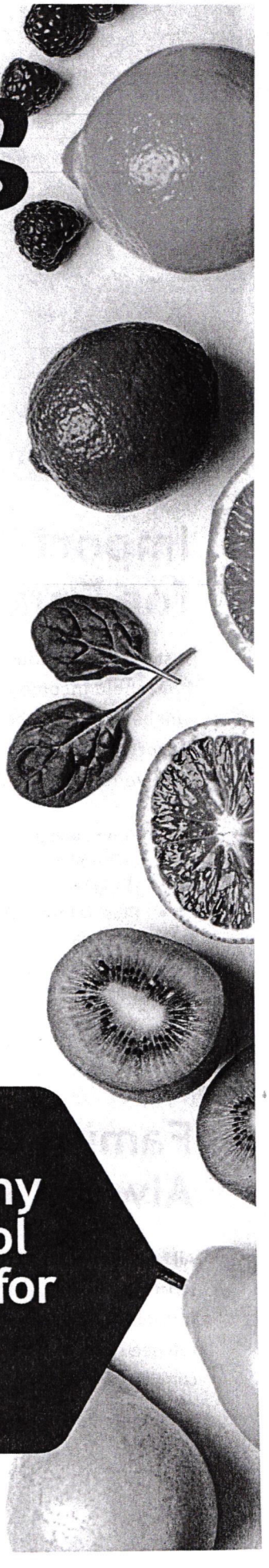
Denied ☐ Over Income Guidelines ☐ Incomplete/Missing _____

Notes:

Determining Official Signature: _____ **Approval / Denial Date:** _____ **Notification Sent:** _____

Note: All types of income must be combined in total household income, not just earnings from work.

Free Meals for All Students



Introducing Healthy School Meals for All

Thanks to the support of Colorado voters, the new Healthy School Meals for All program provides the opportunity for districts to offer free meals to all students at participating schools.

COLORADO
Department of Education

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How You Can Help

Be sure to fill out the form as soon as possible to support your school in providing healthy food and nutritional programs for students!

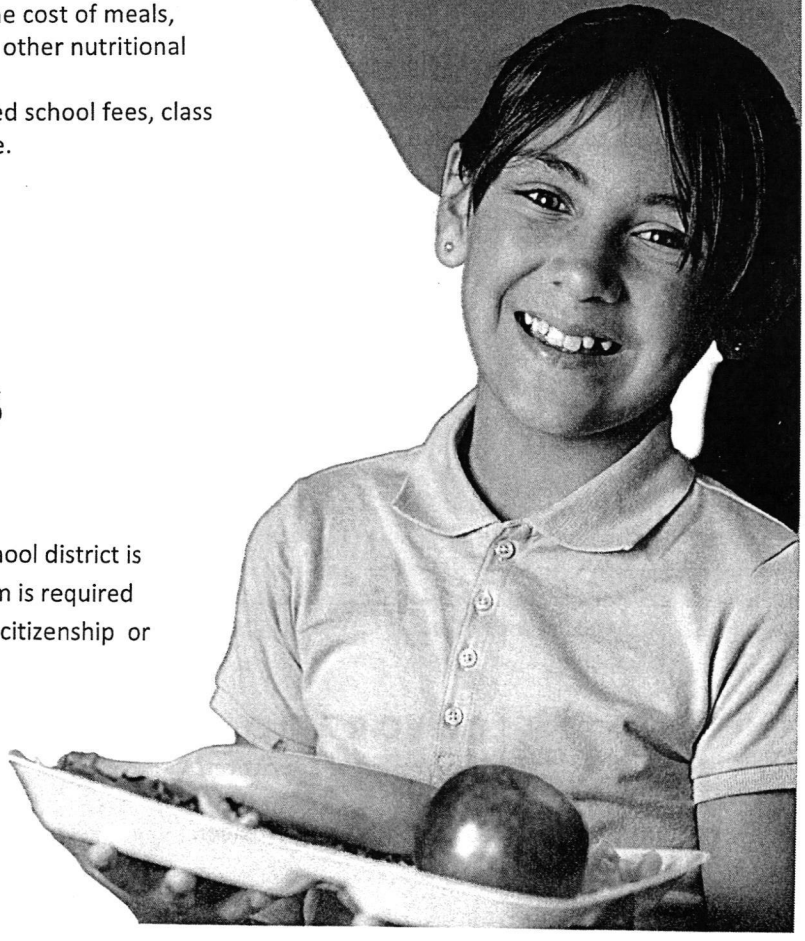


Important Reminders for Families

Just like in previous years, families should continue to provide their household income information to their school district. While meals will be provided for free to all students in participating schools, it's important for your district to continue gathering this information to receive full access to federal funding.

- Funds will go directly to schools to help cover the cost of meals, and will also support after school programs and other nutritional programs for students.
- Plus, families who qualify may receive discounted school fees, class materials, bus passes, utilities support and more.

Contact your school's nutrition department for more information.



Family Information is Always Confidential

All household income information provided to your school district is strictly confidential and protected by law. Only one form is required for all children in the household. Immigration, migrant, citizenship or refugee status is not required when completing the form.

MEAL APPLICATION BENEFITS



Healthy School Meals for All this upcoming 2026-2027 school year will allow all students to eat for free. Parents are still heavily encouraged to submit a meal application form as meal status can make you eligible for additional benefits!

YOU MAY BE ELIGIBLE FOR

- Waived/Reduction in Mandatory District/School Fees (fees including; sports, activities, classroom, testing, field trips, etc.)
- Waived/Reduced Transportation Fees
- Qualify for SNAP, summer meal benefits (SEBT) and other food assistance programs: https://cdhs.colorado.gov/food-assistance
- Advanced Placement (AP) exam/book fees
- Can help increase Funding & Resources for your school

Your child's eligibility status is always kept confidential and now all childern are receiving free meals

For More Info:
Contact your School

To Apply:
www.schoolcafe.com

Support Your Child's School by Completing the Household Income Form

Step-by-Step Instructions

While all students at your school may now get no-cost school meals, it is still important to fill out the household income form. It can help qualify your school for funding to support students. ***It also can help qualify some students for other benefits, such as not having to pay certain school fees.***

These instructions will help guide you through the steps on the form, which is titled Free/Reduced-Price School Meals & Family Economic Data Survey. Complete only one application per household. Use a black or blue pen, not a pencil.

Step 1 List all children

- List first and last names of all children in your household. Providing their date of birth and grade is optional. If you need room to list additional children, use an extra sheet of paper and attach it to the application.
- Check the appropriate box for any Foster Child, Runaway, Homeless and/or Migrant student, or leave blank.
- If you receive benefits from the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF/Colorado Works), and/or Food Distribution Program on Indian Reservations (FDPIR), list your case number from any one of these programs. Do not include your card or account number. ***If you list a case number for any of these benefits, go straight to STEP 3 (skip STEP 2). If you do not receive benefits from any of these programs, leave the case number section blank and go to STEP 2.***

Step 2 Report all household income (for students & adults)

To complete this section, you may want to keep the following information handy:

- Earnings statements or pay stubs from work
- Benefits statements such as those from Social Security or retirement accounts
- Other financial documents for any other sources of income

List all adult household members (including yourself) and their income. If an adult does not have any income, enter '0'. ***Also, list again in this section any students who receive income.*** Report gross income (total income before taxes and deductions). Households with incomes at or below the income limit may be eligible for Summer EBT. For examples of types of income to include in each of these categories, please see the bottom of these instructions.

Types of income to include:

1. **Earnings from work:** Report the total gross income for the period selected, not the hourly wage. Gross income is the total income before taxes or other deductions (like health insurance premiums) are subtracted. For example, if you are paid $500 in gross income every two weeks, write $500 in the income field and check the "every 2 weeks" box. If you do not normally receive overtime pay, do not report it.
2. **Public assistance/child support/alimony:** List the total amount each person receives from child support, alimony, or public assistance programs other than SNAP, TANF/ Colorado Works or FDPIR. For example, if you receive $500 per month in child support, write $500 in the field and check the "monthly" box.
3. **Pensions/retirement/all other income:** Report net income for a self-owned business, farm, or rental income. Report gross income for pension or retirement income. Next to the amount, check how often the person receives it. Do not include any Military Housing Privatization Initiative allowance.

List total household members. Add all the students you listed in **STEP 1** plus all the adults listed in **STEP 2 and enter that number in the "Total Number of Household Members" space.**

Provide the last four digits of your Social Security Number or check the box to note no Social Security Number. This information is not reported to anyone. ***You do not need to provide a Social Security Number if you are only applying for Summer EBT benefits or if all your children attend a Community Eligibility Provision (CEP) school.*** If you are not sure if your school is a CEP school, just ask.

Step 3 Signature & contact information

Sign the application, print your first and last name and the date.
Provide your contact information if you want to receive eligibility notifications. (This is optional.) The mailing address listed will be used to mail a Summer EBT card to families that qualify. If you plan to move, or have recently moved, apply for Summer EBT benefits in the state your child(ren) will complete the school year prior to summer break.

Step 4 Release of information

The information you provide on this application may be shared with Medicaid or State Children's Health Insurance Program (SCHIP) offices. If you do NOT want your information shared with Medicaid/SCHIP, check that box. Check the "yes" box if you DO want your information shared with other programs for which you might qualify. You may have fees waived for certain exams or books if you qualify.

Optional: Provide any listed student's ethnic and racial information. For racial information, you may check more than one box.

Return the completed form to your school or submit it online, if your school district has that option!

What types of income must be reported in Step 2?

See examples below.

Examples of student income
- Earnings from work
- Social Security, disability, or survivor's payments
- Any other type of income regularly received

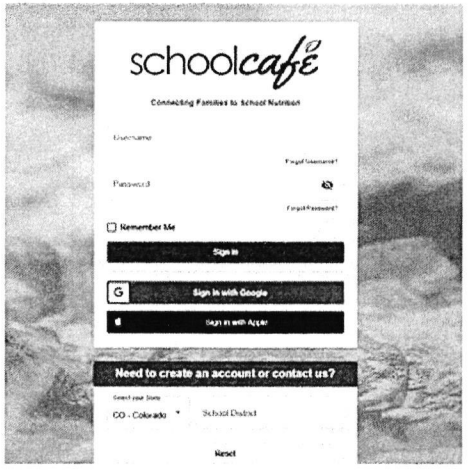
Earnings from work
- Wages, salaries, and tips
- Strike benefits
- Unemployment compensation
- Worker's Compensation
- Net income from a self-owned business or farm

Public assistance/child support/alimony
- Public assistance payments
- Welfare payments
- Alimony payments
- Child support payments
- Social Security benefits

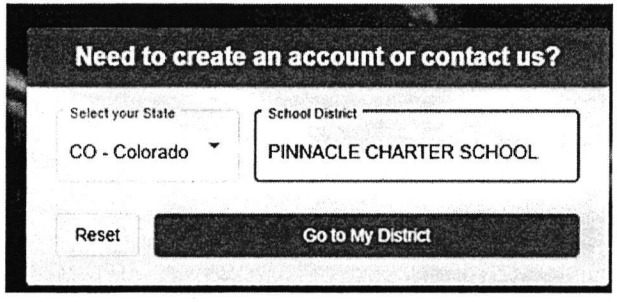
Pensions/retirement/all other income
- Pensions
- Supplemental Security Income
- Retirement income
- Veteran benefits
- Social Security
- Disability benefits
- Cash regularly withdrawn from savings
- Interest and dividends
- Income from estates, trusts, and investments
- Regular contributions from people not living in the household
- Net royalties, annuities, and rental income
- Any other regularly received income, whether federally recognized or not must be reported

How to Apply for Free/Reduced Lunch

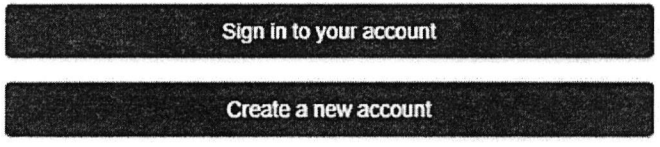
1 Go to your school's direct link or to www.schoolcafe.com



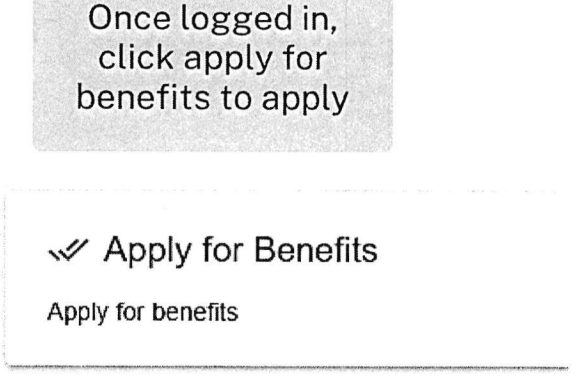
2 At the bottom search your district and click Go To My District.



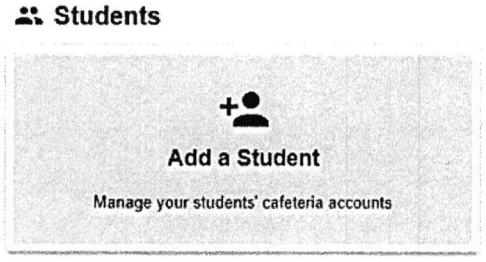
3 **You must have a school cafe account to apply!** Create a new one or Sign into an existing one.



4 Once logged in, click apply for benefits to apply



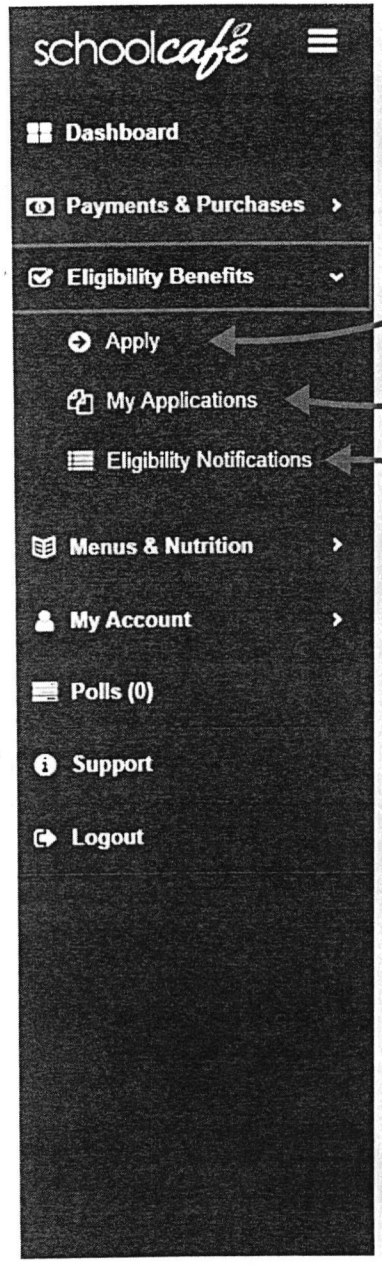
5 If you would like to add funds to your student's account please click Add a Student



or any school cafe technical issues please call: (855) 729-2328

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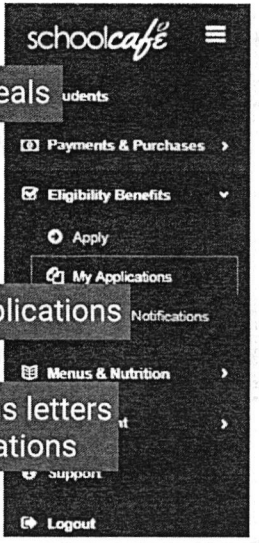
schoolcafé Quick Card

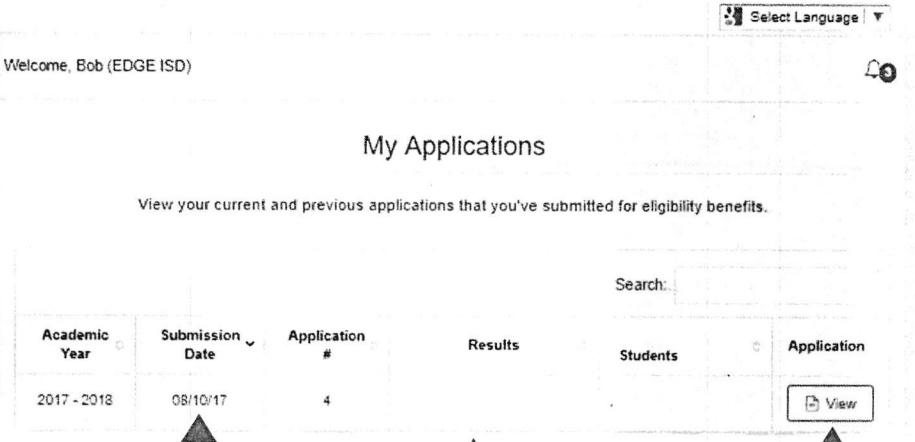


Apply for Free & Reduced Meals

View Previous Applications

View notifications letters regarding applications

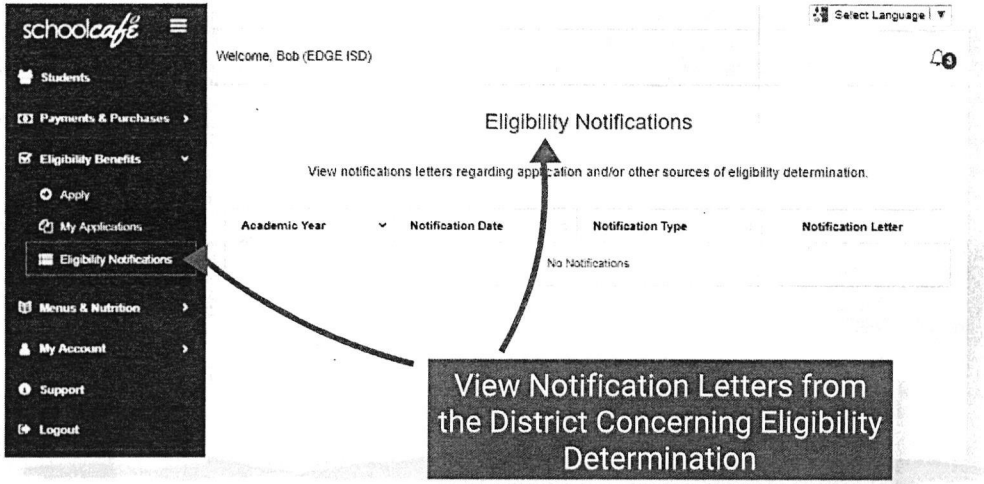




View Submission Dates

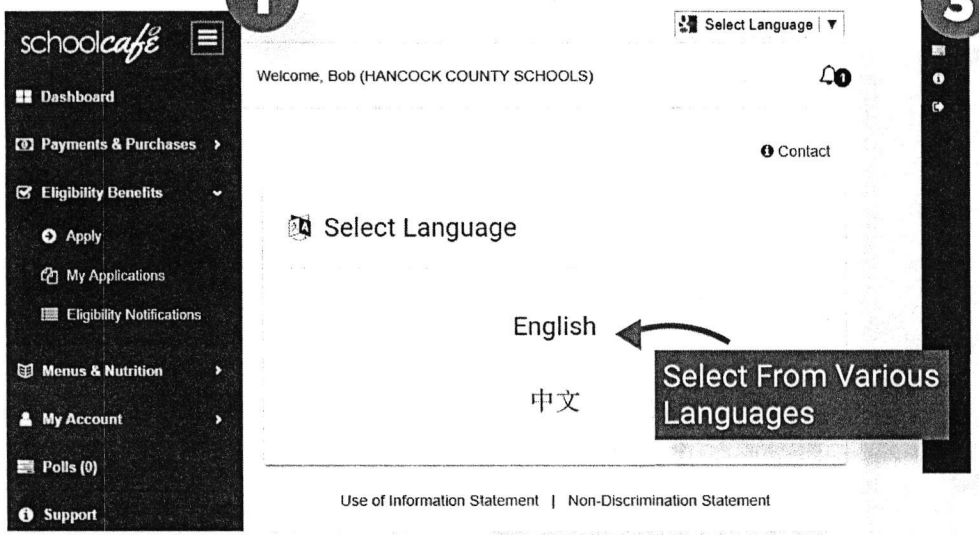
View Submited Application

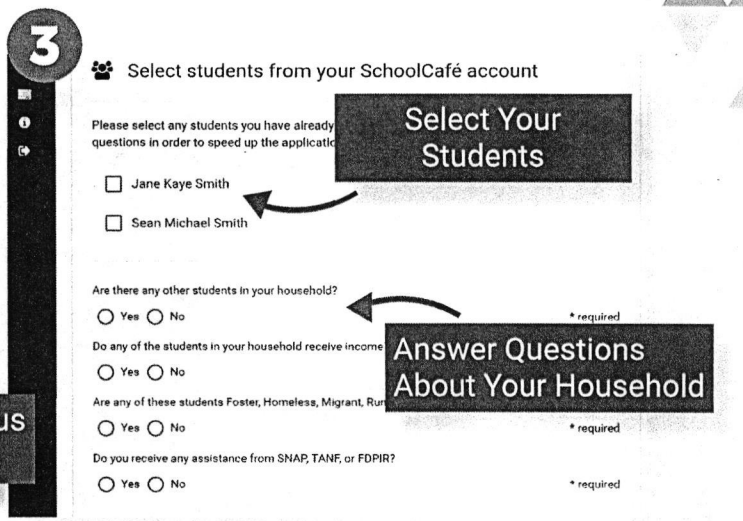
See the Results of Your Applications

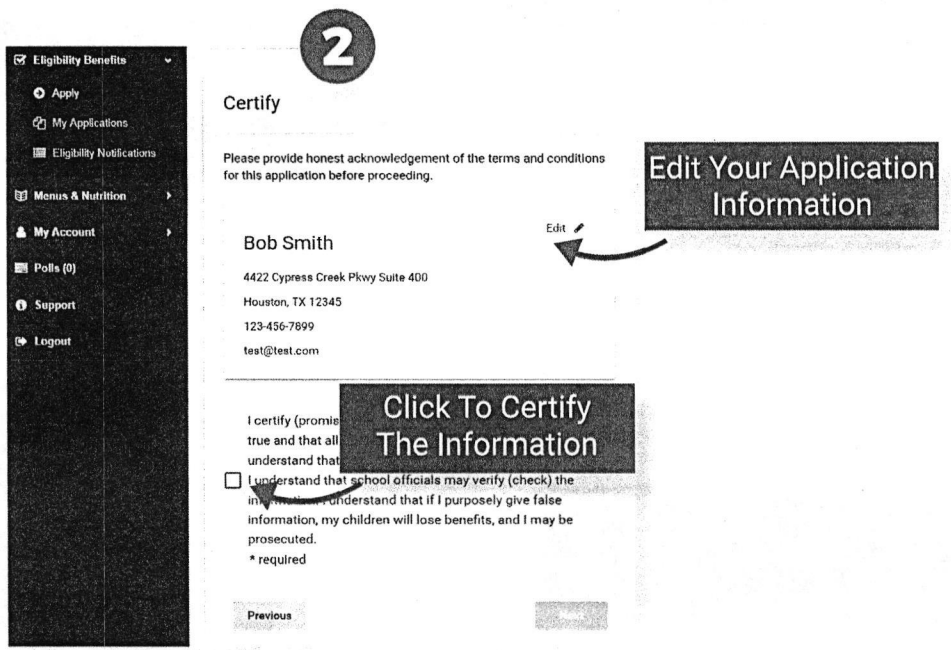


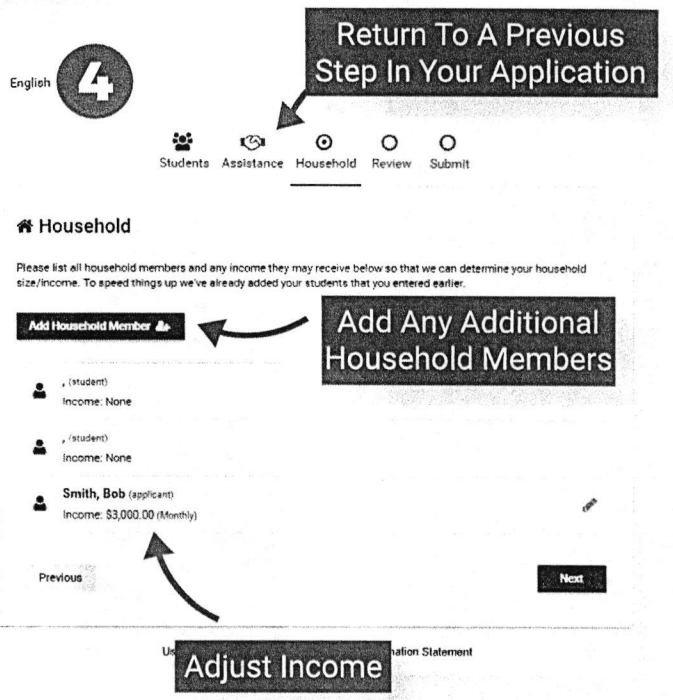
View Notification Letters from the District Concerning Eligibility Determination

schoolcafé Quick Card









schoolcafé Quick Card



Review Your Application Information

Review

Glance over your information and make sure everything looks good. If something needs to be changed you can select the edit option for each section. Otherwise, you can proceed to the next step.

Students ← Go Back to Students

You have indicated that your household contains 2 K-12 student(s).

, Income: None
Foster/Homeless/Migrant/Runaway/Head Start: No

, Income: None
Foster/Homeless/Migrant/Runaway/Head Start: No

Selected Students For Application

Return To Previous Steps To Adjust Any Information

Assistance ← Go Back to Assistance

You have indicated that you did not receive any assistance from SNAP, TANF, or FDPIR.

Assistance Information

Household ← Go Back to Household

Total Household Size (Including Children and Adults): 3

, (student)
Income: None

, (student)
Income: None

Smith, Bob (applicant)
Income: $3,000.00 (Monthly)

Household Information

Previous Next

Enter The Last Four Digits of Your SSN



Submit

Bob Smith

Before submitting, please fill in a few details about yourself. This information will not be shared but helps the food service office contact you with the results of your application.

An adult household member must electronically sign the application. If the household member inform section is ...dult signing this application should have a social security number or mark the"I do not have a SSN"

...o capture the last 4 digits of your social security number for applying. If you do not have a social security number you may indicate that below.

Do you have an SSN?

◉ Yes ○ No

Enter the last 4 digits of your Social Security Number
1234

Digitally Sign Your Online Application

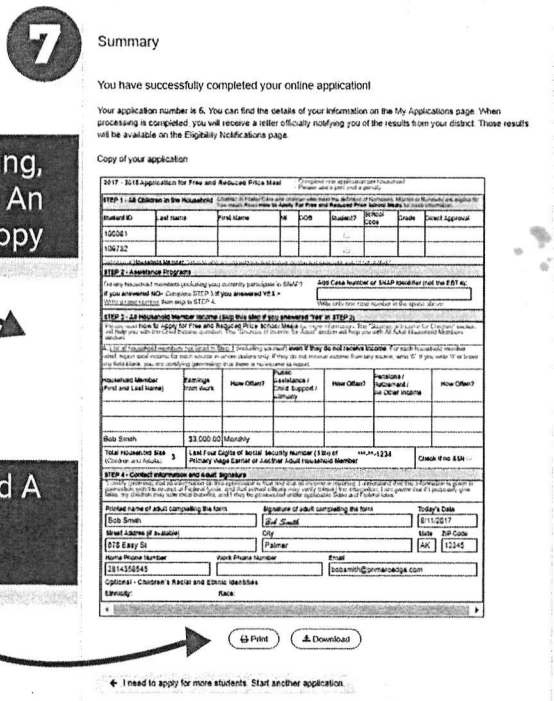
Bob Smith

Your application was successfully verified and signed via IP Address 10.10.100.91.

...k to Review

Submit My Application

Submit Your Application



After Submitting, You'll Receive An Application Copy

Print Or Download A Copy Of Your Application