***District or School Letter Head***

DATE

Dear Parent/Guardian:

**We Need Your Help!**

Our school is participating in a federal program called the Community Eligibility Provision (CEP). This program allows all children in our school to eat at no charge. However, some education programs we provide are funded with state dollars.

We will no longer be collecting Free and Reduced-Price Applications every year, instead, we must collect the Family Income Survey. This form helps us collect household information for all students attending CEP schools. **Without this information,** SCHOOL NAME **could lose important state funding for educational programs that our students are entitled to.**

**What You Can Do**

**Please take a moment to complete the form and return it to your student’s school.** The Family Income Survey captures information and ensures the district/school receives state funding for education programs.

We’re excited to offer no-cost meals to all students and appreciate your help. In order to continue to offer this program, we must collect this important data. If you have any questions, please contact CONTACT PERSON at XXX-XXX-XXXX.

Sincerely,

Principal