



June 1, 2018

Dear Parent/Guardian,

We are excited to offer a vended lunch program at BDCHS. Although BDCHS does not participate in the National School Lunch Program, we will continue to offer qualified households free lunch for students. In order for a student to qualify for free lunch, a BDCHS application form must be filled out. **No other applications will be accepted.** Families must provide proof of income to participate in the program.

Students who qualify for the BDCHS Free Lunch Program will be offered a nutritious lunch on a daily basis.

For field trips requiring lunch, any student who qualifies for the BDCHS Free Lunch Program will be provided a bag lunch and a drink.

Please allow up to two business days for application approval. The parent/guardian must provide lunch for their child during this time. A notice of approval will be sent home with the child.

If you have any questions regarding the application or the BDCHS Free Lunch Program please feel free to contact Café Manager, Maggie Hedley at (813) 971-5600 ext.105 or mhedley@bdchs.org.

Thank you,

Maggie Hedley
Café Manager



Brooks DeBartolo Collegiate High School Lunch Program Application 2018-2019

A copy of a current (2017 year) W-2 for all working household members or Food Stamp verification must be submitted with the application. A copy of a pay stub will be accepted as well. If you need the original form back please put a note on the form stating this and it will be sent back with your child. Please contact mhedley@bdhcs.org if you need clarification on anything.

BDCHS Student Name(s): _____

Parent/Guardian Name

Parent/Guardian Name

Address

Phone Number

Email Address

Number of People in Household (Adults and Children): _____

Signature of Applicant: _____ Date: _____

Please allow two business days for application approval. Brooks DeBartolo Collegiate High School Free Lunch Program uses the Federal Income Guidelines valid July 1, 2018 to June 30, 2019 to determine eligibility.

Office Use Only

Approved: _____ Yes _____ No Auth. # _____ If no, reason: _____

Authorized Signature: _____ Date: _____