

SHARING INFORMATION WITH OTHER PROGRAMS

Dear Parent/Guardian:

To save you time and effort, the information you gave on your Free and Reduced Price School Meals Application may be shared with other programs to reduce instructional or material fees. **For these programs, we must have your permission to share your information. Sending in this form will not change whether your children get free or reduced price meals.**

No! I **DO NOT** want information from my Free and Reduced Price School Meals Application shared with any of these programs.

Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with Akron Public Schools for the purpose of determining instructional or material fees for education.

If you checked yes, fill out the form below.

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Address: _____

Return this form to: The building principal at your child's school.