

Sharing Information with Other Programs

Dear Parent/Guardian:

Based on the information you gave on your Education Benefits Form; your child may qualify for other programs. For the following 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.

Yes! **I DO** want school officials to share information from my Education Benefits Form with:

- ☐ Pay to Participate (Athletics and Clubs).
- ☐ Programs that provide food support (weekend backpacks, holiday meals, etc.).
- ☐ Programs that provide field trip support (reduced rates or scholarships for field trips).
- ☐ Programs that provide school supplies or assist with school fees (filled backpacks and supplies from the requested supply list, testing fees).
- ☐ Programs that provide holiday support (meals, holiday gifts, opportunity for children to shop for gifts at no cost).

If you check "Yes" to any or all of the boxes above, please fill out form below. Your information will be shared only with the programs you checked.

Child's Name: _____ School: _____

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Child's Name: _____ School: _____

Child's Name: _____ School: _____

Printed Name: _____ Address: _____

Signature of Parent/Guardian: _____ Date: _____

For more information, you may call Melissa Alley at 616-887-1744

Return this form to: *Melissa Alley 475 W. Spartan Dr. Sparta MI 49345*