



PALMYRA-EAGLE AREA SCHOOL DISTRICT
Fee Waiver Request

School Year _____

Please list each child for whom you are applying for waiver.

Child's Name	School Name	Grade

Have you filled out and turned in a free and reduced lunch application?

- Yes, please turn in the form to your child's building secretary, or email to the registrar at registrar@peasd.org
- No, please fill out a free and reduced eligibility application 7 days prior to submitting this form (available on-line).

NOTE: You must also electronically sign the form on the reverse side of this document.

Parent's Name _____ Home phone _____
 Street Address _____ Work phone _____
 City/Zip Code _____ Cell phone _____
 Signature _____ Date _____

STATEMENT OF STUDENT NONDISCRIMINATION

All students attending Palmyra-Eagle Area School District schools may participate in all programs and activities, including career and technical education, regardless of creed, race, color, national origin, ancestry, religion, marital status, parental status, pregnancy, homelessness, emotional physical, mental or learning disability or handicap, sexual orientation or sex.

DISTRICT OFFICE ONLY:

Waiver: Accepted Denied

Reason: _____

Reviewed by: _____

Print and submit this form in a sealed envelope, marked "Fee Waiver Request", to any school office. Or email this form to registrar@peasd.org.

This request is only good for one school year. It must be resubmitted each year.



DISCLOSURE OF FREE AND REDUCED PRICE INFORMATION AGREEMENT

I. PURPOSE AND SCOPE

This agreement acknowledges that that children’s free and reduced price meal and free milk eligibility information obtained under provisions of the National School Lunch Act (42 USC 1751 et. seq.) or Child Nutrition Act of 1966 (42 USC 1771 et. seq.) and the regulations implementing those Acts is confidential information. It is intended to ensure that any information disclosed by the Palmyra-Eagle Area School District pursuant to this agreement about children eligible for free and reduced price meals or free milk will be used only for purposes specified by the parents/legal guardians of the student.

II. AUTHORITY

Section 9(b)(2)(C)(iii) of the National School Lunch Act (42 USC 1758(b)(2)(C)(iii) authorizes the limited disclosure of children’s free and reduced price meal or free milk eligibility information to specific programs or individuals, without prior parent/guardian consent. Except that, the parent/guardian must be provided the opportunity to decline to share eligibility information prior to the disclosure for identifying children eligible for benefits under or enrolling children in the State Medicaid Program and the State children’s health insurance program. Additionally, the statute specifies that for any disclosures not authorized by the statute, the consent of children’s parents/guardians must be obtained prior to the disclosure.

III. PENALTIES

Any person who publishes, divulges, discloses, or makes known in any manner, or to any extent not authorized by Federal law (Section 9(b)(2)(C) of the National School Lunch Act; 42 USC 1758(b)(2)(C) or a regulation, any information about a child’s eligibility for free and reduced price meals or free milk shall be fined not more than \$1,000 or imprisoned not more than 1 year or both.

IV. AUTHORIZATION

I, _____, parent / legal guardian of _____, a student in the Palmyra-Eagle Area School District during the _____ school year, hereby request and authorize the release of the above student’s eligibility for free or reduced meals under the National School Lunch Program (NSLP). I understand that the Palmyra-Eagle Area School District will disclose the student’s name, address, and eligibility as “free,” “reduced” or “full pay” on the date reported. This authorization is limited to disclosure to and use by the Palmyra-Eagle Area School District to determine the eligibility for field trip assistance and/or the waiver or reduction of fees for school supplies or activities. The Palmyra-Eagle Area School District shall not be held liable for any damages resulting from complying with this authorization.

Parent / Guardian

Date

NOTICES

1. Failing to sign this consent statement will not affect eligibility or participation for the National School Lunch Program.
2. Recipients of this information are prohibited from sharing such information with any other entity or program.

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