# HOW TO COMPLETE the Online Free and Reduced Meal Application
## (A NEW APPLICATION IS REQUIRED EVERY SCHOOL YEAR)

1.  Go to the following link:  www.fortbendisd.heartlandapps.com
    OR Go to the FBSID Home page (www.fortbendisd.com) → Link on the Left of Page
    OR Go to the FBISD Home Page (www.fortbendisd.com) → Departments and Services → Child Nutrition
    →Online Free and Reduced Application – Links located on the left, right and middle of the page

2.  Families will need the following information available when completing the online application:
    *   Student's legal name (first and last), birth date, and assigned Student ID number (if known)
    *   Student's school name
    *   All household _gross_ income and/or SNAP (formerly food stamps) or TANF eligibility determination group number EDG #.  (Note:  The EDG# is not the case number or the Lone Star Card number).
    *   Last four digits of the parent's/guardian's social security number

    Parents/guardians who do not have computer access may:
    *   Visit their child's school and complete the application on a school computer
    *   Visit FBISD's Child Nutrition Department (555 Julie Rivers Dr., Sugar Land, 77478) for computer access. Families may complete online applications Monday through Friday in the morning (from 9:00 a.m. to 11:00 a.m.) or afternoon (from 1:30 p.m. to 3:30 p.m.)
    *   Request an application from their child's campus

3.  The "Letter to Household" will appear on the screen.  The parent/guardian can select Spanish if needed.  Review and Click Next.

4. The first "Child Information" page displays next.  Enter the total number of infants, children and **FBISD** students living in the household.  Click Next.



5. The second "Child Information" page displays next.  Enter information for all infants, children and **FBISD** students living in the household, answer the "Is this a Student" question and mark box if child is a Foster Child or Homeless, Migrant*, or Runaway.  Click Next.

   (*Migrant not Immigrant.  Such as a migrant farm worker within the United States.)

6. The "Assistance Programs" page displays next.  If any person in the household is receiving SNAP or TANF or FDPIR benefits, enter the **E**ligibility **D**etermination **G**roup #.  Click Next.



7. The "Child Income" page displays next.  Enter the total income of all children in the household – leave blank if zero.  Click Next.

8. The first "Household Members and Income" page displays next.  Enter the total number of household members that were not listed on the "Child Information" pages.  Click Next.



9. The second "Household Members and Income" page displays next.  Enter the name and income of each household member not listed on the "Child Information" pages.  Leave income blank if zero.  (This information will not be required if a valid EDG # was entered.  Click Next.

10. The parent/guardian must enter signer and address information the application. Click Next.



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11. The Summary Page views next for the parent/guardian to verify the application information . Click Next.

# Fort Bend ISD
Online Free and Reduced Application

Contact Us    Privacy / Terms    Letter

Start ≫ Children Info ≫ Household Info ≫ General Info ≫ Summary ≫ Finish & Submit

Instructions

## Summary & Review
Please review the information and verify that it is correct. Make any modifications necessary by using the link next to each section.
Fort Bend ISD

**Assistance Programs**                                                          Change Assistance Programs
You have NOT indicated an assistance program for a student.

**Child(ren) Information**                                                          Change Child Information

| Student Number | Child Name | Grade | School | Birthdate | Case # | Income | Frequency | Foster | Homeless Migrant Runaway 1 |
|---|---|---|---|---|---|---|---|---|---|
| 99999 | Jane Doe | 2 | Arizona Fleming Elementary | 3/3/2010 | | | | N | N |
| | James Doe | | | | | | | N | N |

**Household Information**                                                          Change Household Information

| Name | Earnings | Frequency | Welfare | Frequency | Pension | Frequency | Other | Frequency |
|---|---|---|---|---|---|---|---|---|
| John Doe | $500.00 | Weekly | | | | | | |
| Suzy Doe | | | $75.00 | Weekly | | | | |

| Total Household Members = 4 | Total Household Income = $575.00 / Weekly |
|---|---|

**Adult Signer Information**                                                          Change Adult Signer Information
John Doe
0000
12345 Main St
Anywhere, TX 77777
(123) 456-7890 (Home/Cell) (123) 456-7890 (Work)
johndoe@email.com

Previous    Next

12. The parent/guardian must enter their name.  The parent/guardian may print the application by using the link provided.  Click the "Finish" box to submit the application.  Click Finish.



13. The parent/guardian will get a confirmation number once they have successfully submitted the application.  The parent/guardian can enter an email address to receive a confirmation email.  The parent/guardian can click on the bottom link to print their application.