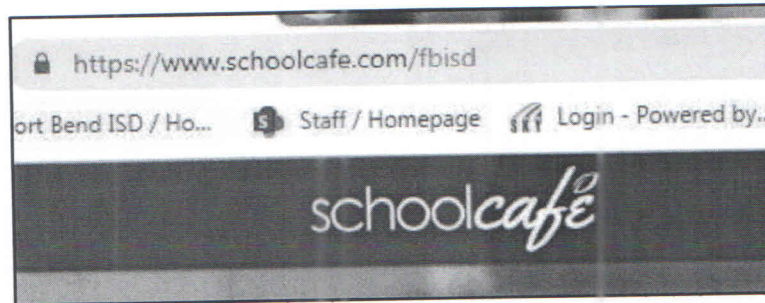
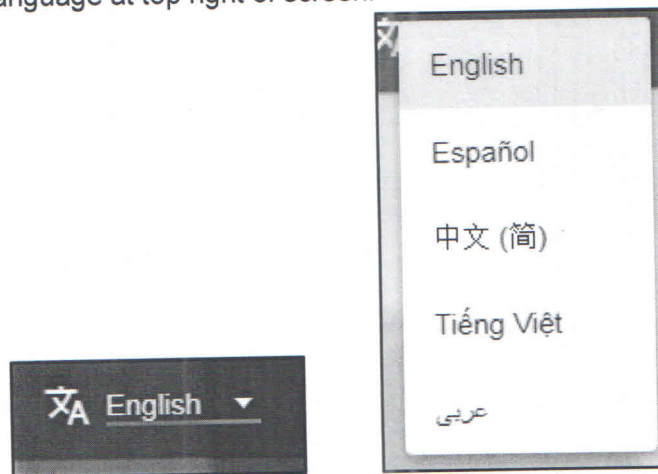


Guide to Completing the Online Free and Reduced-Price Meal Application

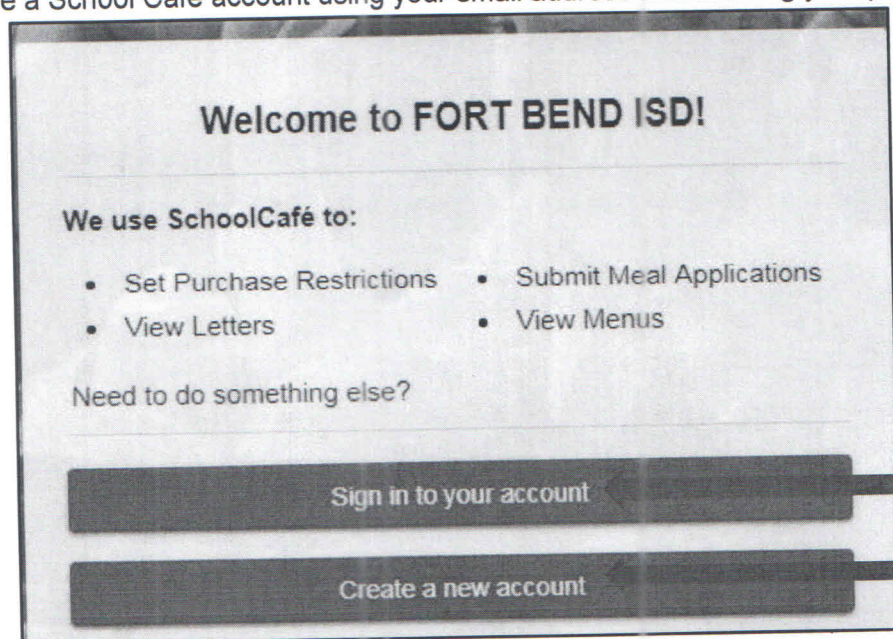
1. Open your web browser and go to www.schoolcafe.com/fbisd or follow the link on our home page at www.fortbendisd.com, "Quick Links", "Free and Reduced-Price Lunch Application – Check Your Status".



2. Choose your language at top right of screen.



3. "Create a New Account" in School Café if you do not already have one or, "Sign In to Your Account" if you already have a School Café account using your email address and entering your password.



schoolcafé

Create your account here.
Choose the correct category.

Register

☒ **I'm a Parent**

I want to manage my child's cafeteria account.

☐ **I'm a Student at this District**

I want to manage my own cafeteria account.

☐ **I'm an Employee of this District**

I want to manage my own cafeteria account.

Next

Return to My District

Welcome to FORT BEND ISD!

Sign in to your account

Username

|

 required

[Forgot Username?](#)

Password



[Forgot Password?](#)

☐ Remember Me

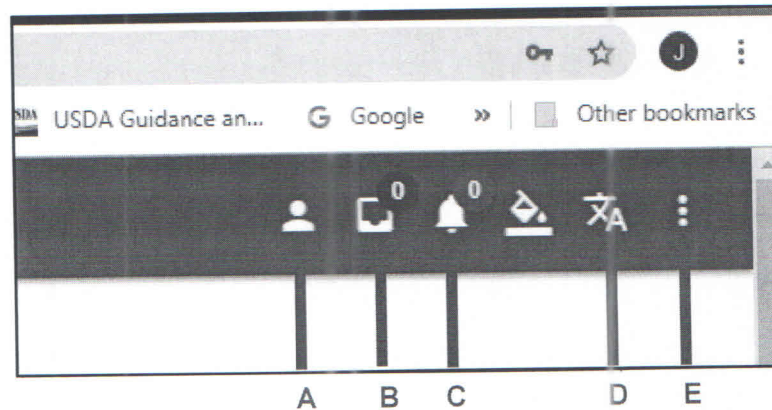
Sign in



Sign in with Google

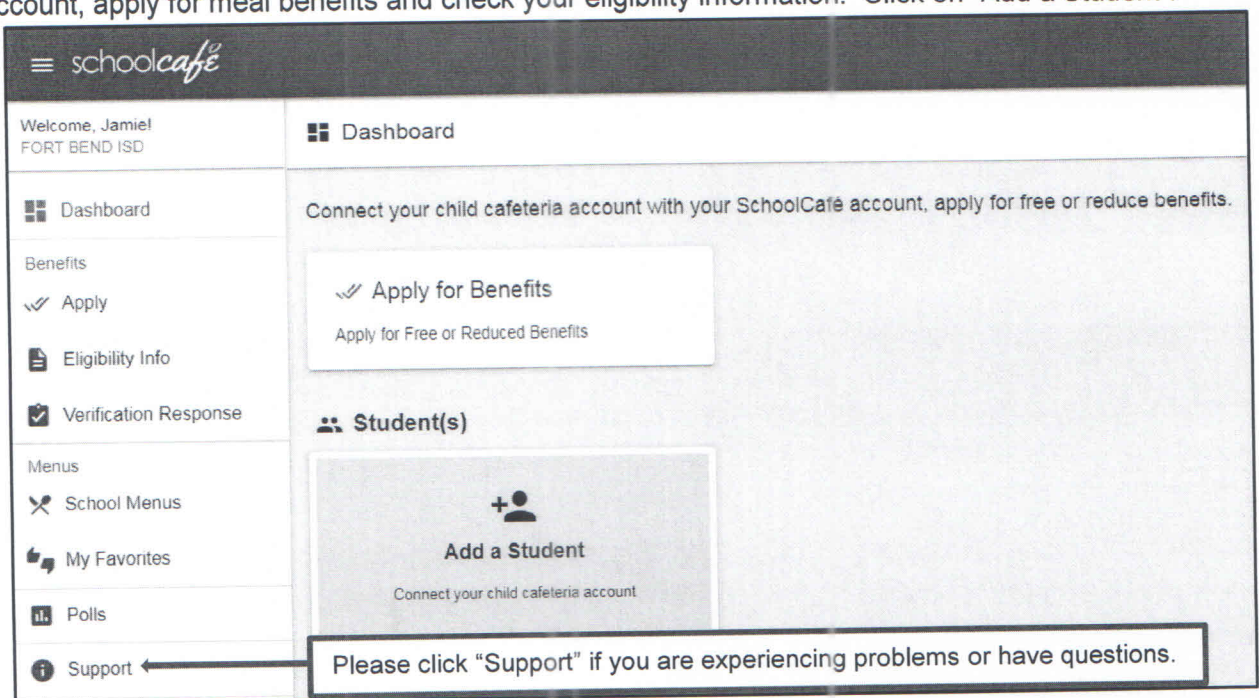
Close

4. Once you sign in, you will see this screen. Please note the different icons at the top of the screen on the right.



- A = Your Profile Settings
B = School Café Announcements
C = School Café Alerts
D = Choose a Language - English
E = Log Out

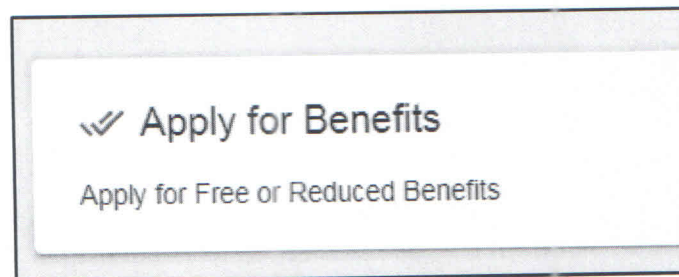
5. You will also see this image on the screen. From here, you can add your FBISD student(s) to your account, apply for meal benefits and check your eligibility information. Click on "Add a Student".



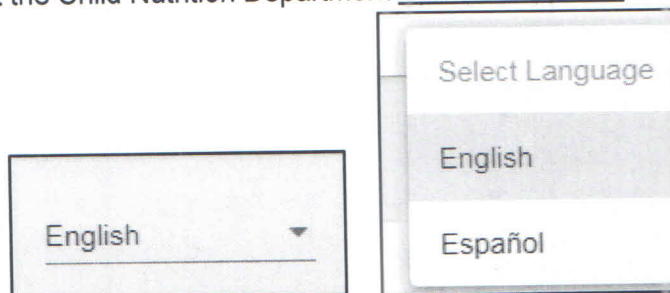
6. Complete the information and repeat the process to add more than one FBISD student to your account.

The screenshot shows a web form titled "Add a Student". It contains three input fields: "Student ID" with the value "TS2345", "School" with the value "Ridgegate Elementary", and "Last name" with the value "Test". Each field has an annotation box with an arrow pointing to it: "Enter your Student's ID Number.", "Enter your Student's School Name.", and "Enter your Student's Last Name.". A callout box points to a drop-down arrow on the right of the "School" field, stating "Use the drop down arrow to find the campus.". At the bottom, there is a "Cancel" button, a "Search & Verify" button, and an annotation box with an arrow pointing to the "Search & Verify" button that says "Click 'Search & Verify.'". A message box at the top of the form states: "If you do not know the Student ID please contact the Child Nutrition office (you can find their contact info on the Support page). SchoolCafé does not have this information."


7. Now you are ready to apply for Free and Reduced-Price Meal Benefits. Click the "Apply for Benefits" box.



8. Choose your language at top right of screen – English or Spanish only. If you need other languages, please contact the Child Nutrition Department with an interpreter for assistance.



9. The Household Letter will appear. If you wish, download this letter by clicking the "Download Household Letter" box however, the letter will always appear when you click the "Apply for Benefits" box anytime you wish to read it. Click "Next" at the bottom of the screen.




FREE or REDUCED PRICE MEALS
INFORMATION LETTER TO HOUSEHOLD

Business and Finance
Child Nutrition Department

Dear Parent/Guardian:

Children need healthy meals to learn, and Fort Bend ISD offers healthy meals every school day. Breakfast costs \$1.25; lunch costs elementary: \$2.25; secondary: \$2.50. Your children may qualify for free meals or for reduced-price meals. Reduced-price is \$0.30 for breakfast and \$0.40 for lunch. If you received a notification letter that a child is directly certified for free or reduced-price meals, do not complete an application. Let the Child Nutrition Department know if any children in the household attending school are not listed in the letter.

 Download Household Letter


Next

10. You will see the Certify screen.

Certify

Please provide honest acknowledgement of the terms and conditions for this application before proceeding.

Jamie McLaggan
555 Julie Rivers Drive
Sugar Land, TX 77478
(281) 634-1196
jamie.mclaggan@fortbendisd.com


Edit 


Your account information will appear. If you choose to edit this field, it will edit your Profile information in School Café. Any future emails will go to the new address. Make sure of the email address you wish to use for notices before continuing.


☐ I certify (promise) that all information on this application is true and that all income is reported (where required). school officials may verify (check) the information. I understand that if I purposely give false information, my child
* required


Check the box to certify that the information you are submitting is true and correct.


11. If you "Add a Student" at account creation, they will appear on this page. If you need to add a FBISD student or add more FBISD students, use the "Add a Student" button on this page.


 Students

 Assistance

 Household



 **Students**
Enter all students in **Fort Bend ISD**.

Add a Student+ 

You do not have any students associated with your SchoolCafé account.

12. Click the "Add a Student" button. Complete all requested information. If it is in RED the information is required. When complete click "Add this Student" at the bottom.

Add a Student

Student ID

Enter your Student's ID Number if known. It is not required but very helpful when processing your application.

First Name

* required


Last Name

* required


Middle Name

Enter your Student's middle name, date of birth and school name if known. It is not required but very helpful when processing your application. Many students in the District have the same first and last name.

Date of Birth



School



Is this student a Foster, Homeless, Migrant, Runaway, Head Start child?

☐ Yes ☐ No

* required

Does this student receive income?

☐ Yes ☐ No

* required

To ensure that we can match your students, please enter as many details as possible.

Cancel

Add this Student

13. Click "Next" and the Assistance page appears. If "Yes", mark the circle and choose the type of assistance. Enter your Eligibility Determination Group Number (EDG#) for your SNAP (food stamps) or TANF (assistance for needy families) benefits issued by the State of Texas only. **No other states are accepted.**

Students Assistance Household Review

★ Assistance

Does anyone in your household receive SNAP (food stamps), TANF or FDPIR?

☒ Yes ☐ No

Benefits Received * required

What type of benefits do you receive?

☒ SNAP ☐ TANF ☐ FDPIR

What is your Eligibility Determination Group Number (EDG#)?

EDG#

14. If "No", mark that circle and click the "Next" button. Enter the income of the Adult Household Member that is completing the application.

Update Applicant

Name:
Jamie McLaggan

Does this member receive income?


☒ Yes ☐ No

If this household member receives income, please enter the GROSS (pre-tax) amount and frequency.


\$ Income (Work)	Frequency	×
\$ Income (Assistance)	Frequency	×
\$ Income (Other)	Frequency	×


Cancel Add this Member


15. Click "Add this Member". If you need to add more children **not** attending FBISD or more adults in the household, click the "Add Household Member" button and follow the above steps. When complete, click "Next".

 **Household**

Please list all other household members (adults,

Add Household Member 


 **Test, CND** (student)
Income: None

 **McLaggan, Jamie** (applicant)
Income: \$250.00 (Every 2 Weeks)


16. You will see the "Review" page. Review your application information for correctness.


Review

Review your information and make sure everything looks good. If something needs to be changed you can select the edit option for


 **Students**

You have indicated that your household contains 1 student(s) enrolled in FBISD:


 **Test, CND**
Ridgegate Elementary ,
Income: None
Foster/Homeless/Migrant Farm Worker in the United States/Runaway/Head Start: No


 **Assistance**

You have indicated that you do not receive any assistance from SNAP, TANF, or FDPIR.

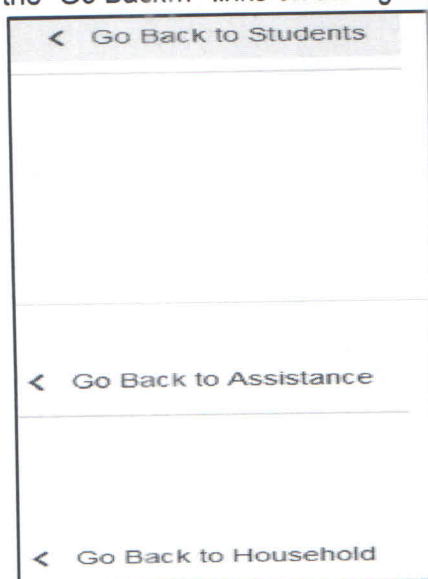
 **Household**

Household Size : 2.

 **Test, CND** (student)
Income: None

 **McLaggan, Jamie** (applicant)
Income: \$250.00 (Every 2 Weeks)

17. If you need to make changes, use the "Go Back..." links on the right of your screen.



< Go Back to Students

< Go Back to Assistance

< Go Back to Household

18. If the information is correct, click the "Next" button. You will see this screen. Click "Next".

Optional Info

(You do not have to complete this part to receive free or reduced priced meals.)

Ethnicity

- ☐ Hispanic or Latino
- ☐ Not Hispanic or Latino

Racial Identity

- ☐ Asian
- ☐ American Indian or Alaskan Native
- ☐ Black or African American
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White

Consent to Release Meal Eligibility

At this time, no optional programs exist that might request your information, so you can ignore this section.

Information Sharing

- ☐ By checking this box, you voluntarily consent to let your child(ren)'s school share your child(ren)'s meal eligibility listed.

19. You will see the "Submit" screen – complete the "Do you have an SSN?" – Social Security Number. Answer "Yes" or "No". If yes, enter the last four digits of your number. Then check the box next to the correct Adult Household Member completing the application and click "Sign".

☒ **Submit**

Before submitting, please fill in a few details about yours

An adult household member must electronically sign the

Law requires us to capture the last 4 digits of your social

Do you have an SSN?

☒ Yes ☐ No

Enter the last 4 digit of your Social Security Number

1234

Please select the applicant signing the application:

☒ Jamie McLaggan

Sign

20. Once signed, click the "Submit My Application" button on the bottom right.

Jamie McLaggan

s successfully verified and signed via IP Address 50.226.26.96.

☒ **Submit My Application**

21. You can print or save your application however, it will always be available to you in School Café.

Summary

You have successfully completed your online application!

Your application number is **8**. You can find the details of your information on the My Applications page. When processing is completed, you will receive a letter officially available on the Eligibility Notifications page.

Copy of your application

Once your application is complete, you will receive an immediate response on this page.

2019 - 2020 Application for Free and Reduced Price Meal										- Complete one application per household. - Please use a pen (not a pencil).		Application #: 8	
STEP 1 - All Children in the Household										Children in Foster Care and children who meet the definition of Homeless, Migrant or Runaway are eligible for free meals. Read How to Apply For Free and Reduced Price School Meals for more information.			
Student ID	Last Name	First Name	MI	DOB	Student?	School Code	Grade	Direct Approval					
	Test	CND			<input type="checkbox"/>	116							
Definition of Household Member: "Anyone who is living with you and shares income and expenses, even if not related."													
STEP 2 - Assistance Programs													
Do any household members (including you) currently participate in SNAP?										Add Case # / EDG # or SNAP Identifier (not the EBT #):			
If you answered NO> Complete STEP 3. If you answered YES >													

22. If there is more information needed, the Child Nutrition Department will complete the information or call you for assistance.
23. Once the application is processed, you will receive an email notification letter. Your letter is also available in your School Café account for your convenience. If your email fails, we will mail you a printed letter.
24. Please contact us at 281-635-1855 if you need assistance.