

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 for which your children may qualify. 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 Free and Reduced-Price School Meals Application with the Nicolet High Business Office for the purpose of waiving registration fees.
- Yes! I DO want school officials to share information from my Free and Reduced-Price School Meals Application with the Nicolet High Business Office for the purpose of waiving testing fees.
- Yes! I DO want school officials to share information from my Free and Reduced-Price School Meals Application with the Nicolet High Business Office for the purpose of waiving instrument rental fees.
- Yes! I DO want school officials to share information from my Free and Reduced-Price School Meals Application with the Nicolet High Business Office for the purpose of waiving transcript fees.
- Yes! I DO want school officials to share information from my Free and Reduced-Price School Meals Application with the Nicolet High Business Office for the purpose of waiving class fees.
- Yes! I DO want school officials to share information from my Free and Reduced-Price School Meals Application with the Nicolet High School Athletics Department for the purpose of reducing athletic/activities participation fees (50%) and other eligible costs.
- No! I **DO NOT** want school official to share information from my Free and Reduced-Price School Meals Application

If you checked yes to any or all of the boxes above, fill out the form below to ensure that your information is shared for the child(ren) listed below. Your information will be shared only with the programs you checked.

Child's Name: _____

Child's Name: _____

Child's Name: _____

Child's Name: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Address: _____

For more information, you may contact:

Angela Mehrtens at 414.351.7579 or angela.mehrtens@nicolet.us

Return this form to:

Angela Mehrtens
Nicolet High School (Student Services Office)
6701 N Jean Nicolet Rd
Glendale, WI 53217

USDA Nondiscrimination Statement

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Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410
- (2) fax: (202) 690-7442; or
- (3) email: program.intake@usda.gov.

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