



THE L ROAR

**2023-24
School Year!**

August 15, 2023

UPCOMING EVENTS

August 29 -31:

Teacher Workshop

August 30, 7:00 pm:

Orientation for 6th, 7th & 9th
grade students & parents

September 4 LABOR DAY

Tuesday, September 5

FIRST DAY SCHOOL 6-12
GRADERS

September 5 & 6

ASSESSMENT DAYS for K-5

Thursday, September 7

FIRST DAY SCHOOL for K-5

Monday, September 11

PICTURE DAY 4K-12

Monday, September 18, 7pm

SCHOOL BOARD MEETING

[Click Here](#) to see more

upcoming events

ANNOUNCEMENTS

Classes begin for 6th-12th

TUESDAY, SEPTEMBER 5 8:25 A.M.

Breakfast 8:00-8:20, Tardy Bell 8:25

There will be Assessment days for K-5
on September 5 & 6

Classes begin for grades K-5

THURSDAY, SEPTEMBER 7, 8:25 A.M.

Breakfast 8:00-8:20, Tardy Bell 8:25

- - - THINGS TO DO BEFORE SCHOOL BEGINS - - -

1.

Make sure your child has every-
thing they need for the new year.

There is a good chance that you
can reuse many of the supplies your
child may have left from last year.
A link to school supply lists can be
found on the school homepage of
our website or here:

[Elementary School Supply List](#)

[High School Supply List](#)

2.

If you are a

6th, 7th or 9th grader,
(or if you are new to the district and have
children in 6th - 12th grade)

PARENTS & STUDENT(S)
are invited to attend

Orientation on Wednesday,
August 30, 7:00 pm

Enter doors #1 or #2, there will be signs
directing you where to go

3.

ALL FAMILIES - -

Make sure all your CONTACT INFORMATION is CORRECT! - - -

Log into JMC <https://sg.onlinejmc.com> ;

Click on "Family"; make sure the School Year drop down says "2023-24";
User name is your last name. Password is something you have chosen.

Contact the office if you forgot your password or if you need help.

When you are in JMC, go to the Registration for 2023-24 tab on the left.

While you are logged in you can pay for lunch and any fall activities.

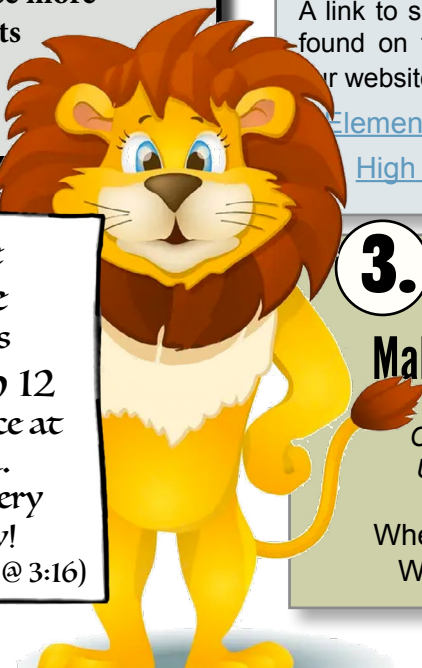
OUR MISSION

Hear Ye
Hear Ye
All Classes

K through 12
will commence at
8:25 a.m.

each and every
school day!

(Dismissal Bell @ 3:16)



ASSESSMENT DAYS & CONFERENCES

4.

TEACHERS/ GRADES	SEPTEMBER	NOVEMBER	JANUARY	MARCH
Kindergarten - Bjerke/Solberg 1 st Bratland 1 st Becker 2 nd Tollefsrud 2/3 Schultz	Assessment Days 7:45 am - 6:15 pm both days Tuesday, September 5 & Wednesday, September 6 Classes begin Thursday September 7	NO Conferences	Conferences Tues., January 23 & Thu., January 25	NO Conferences
3 rd Morken 4 th Parker 4 th Strand 5 th Hammel 5 th Grinde Deck	Assessment Days 10:15 am - 6:15 pm Tuesday, September 5 & 7:45 am - 3:15 pm Wednesday, September 6 Classes begin Thursday September 7	Conferences 4:00 - 7:00 Tuesday Nov 14, Thursday Nov 16	NO Conferences	Conferences 4:00- 7:00 Thursday Mar 14, Tuesday Mar 19,
6th - 12th Grade	NO Assessment Days Classes begin Tuesday, September 5	Conferences 4:00- 7:00 Tuesday Nov 14, Thursday Nov 16	NO Conferences	Conferences 4:00- 7:00 Thursday Mar 14, Tuesday Mar 19,

SEPTEMBER ASSESSMENT DAYS SIGN UP

PARENTS, please sign up for an assessment time for each of your K-5th grade student(s).

Assessment days are

Tuesday, September 5 and Wednesday, September 6.

K - 2/3 (Schultz) are 7:45am - 6:15pm both days and

3rd - 5th grade are 10:15 am - 6:15 pm Tuesday, September 5

& 7:45 am - 3:15 pm Wednesday, September 6

The link to sign up on PTCfast for assessments: https://ptcfast.com/schools/Spring_Grove_School

The link is also on the homepage of the school webpage under "Links for Parents" (bottom of the page)

If you/your student does not attend a fall assessment day,
your student will be marked absent from school.

FOOD SERVICE

Just a reminder, Spring Grove Public Schools is participating in the MN Free School Meals Program beginning in the 2023-24 school year. In order for meals to be free, students must choose at least 3 items at breakfast and at least 3 components at lunch, one of the items/components must be at least a 1/2 cup serving of fruit or vegetable at each meal service. **Only meals that meet the above requirements are free, additional entrees, milk or single items will be charged** as an ala carte (ie. not a free all you eat buffet). Meals that don't meet the requirements and second meals will be charged at the adult price of \$2.50 for breakfast and \$4.95 for lunch. Please complete the Application for Education Benefits if you

think you may qualify and did not receive a direct certification notification

from the district. Eligible students and families may qualify for other program fee reductions based on their eligibility for free or reduced price meals. Your application also helps the school qualify for education funds, grants and discounts.

[Click here](#) for the 2023-2024 Free & Reduced Meal Application, it also on pages 9-12 of this Lions Roar.

This institution is an equal opportunity provider.



SUMMER ENRICHMENT TRIPS

Spring Grove students had the opportunity to attend summer enrichment field trips to Prairie du Chien Historical Society, Camp Outdoor Camp, and Museum. Students expanded their knowledge of local history and developed new awareness of cultures local to them in the past and present. On these immersive trips, students saw real historical artifacts, explored building sites and places, and honed their outdoor survival skills. Students learned knot tying, shooting bow and arrow, and developed their natural sense of direction. We had an absolutely wonderful time exploring new places and are excited to add more adventures in the future!



Villa Louis
PRAIRIE DU CHIEN • WISCONSIN



CAMP DECORAH
VISITED SPRING GROVE SCHOOL!



V VESTERHEIM



Save Receipts for School Supplies!

The Minnesota Department of Revenue offers two valuable tax benefits for parents who purchase school supplies for their K-12 students: the K-12 Education Credit and Subtraction.

These benefits can reduce parents' taxes to increase their refund, but is only available for those who keep their receipts. Purchases for most school supplies, field trips, and musical instruments for school band are eligible.

Most Minnesota parents qualify for the K-12 subtraction, which reduces their taxable income. Parents under certain income limits may also qualify for the K-12 credit, which can refund up to 75% of their costs – even for parents who do not owe any taxes. Visit Revenue's website for details.

Here is a link to an informative video:

<https://www.youtube.com/watch?v=NQ5lauMXRMO>



Save Receipts For Your Child's Education Expenses

If you're buying school supplies for your children in kindergarten through 12th grade, you may qualify for one or both of these tax relief programs:

- K-12 Education Subtraction
- K-12 Education Credit

Save your receipts, because both programs can help lower your taxes and may provide a larger refund when filing your Minnesota income tax return.

Last year, more than 17,500 families received the K-12 Education Credit and saved an average of \$282. Over 138,000 families received the K-12 Education Subtraction with an average subtraction of \$1,285.

Common Expenses That Qualify:

- School supplies (pencils, paper, calculators)
- Educational computer hardware and software
- Tutoring K-12 curriculum by a qualified instructor
- Rental or purchase of musical instruments used during school

Expenses That Do Not Qualify:

- School supplies not used in education (backpacks, tissues, organizers)
- Clothing, including school uniforms (except required gym clothes)
- School lunches
- Family trip to museum or zoo

Do I qualify?

To qualify for either the credit or subtraction, both of these must be true:

- You purchased educational services or materials to assist with your child's education
- Your child is attending kindergarten through 12th grade at a public, private, or home school

Income limits for Each Program

K-12 Education Credit: Your adjusted gross income must be below the levels shown here. If you qualify for the credit, you must file a Minnesota return to claim a refund.

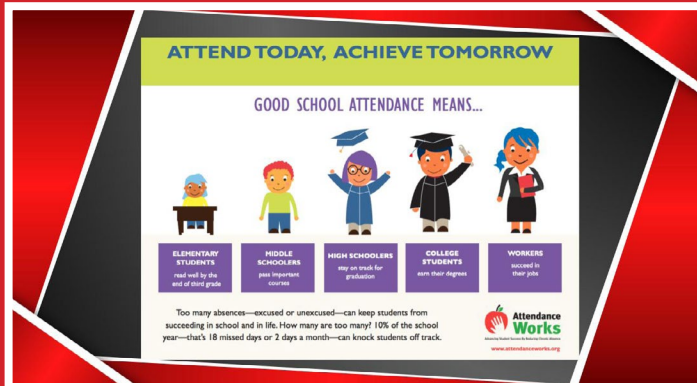
Number of qualifying children in K-12:	Adjusted gross income must be less than:
1 or 2	\$76,000
3	\$79,000
More than 3	\$79,000 plus \$3,000 for each additional child

K-12 Education Subtraction: There are no income limits for the education subtraction.

For more information on these programs and other valuable tax information, visit www.revenue.state.mn.us and enter **K12** in the Search box or call us at 651-296-3781 or 800-652-9094.



IF YOU ARE MISSING SCHOOL, YOU ARE MISSING OUT!



Click here to [watch Mr. Kjelland's video explaining ATTENDANCE](#)

Click here to open the [slide show](#), that he shares and have access to the links.

ELEMENTARY ART NOTES

"Back to School."...words that bring football games and Autumn leaves to mind. Add to that the shopping trip to outfit the kids with backpacks, #2 pencils and Crayola crayons.

Let me add to your list two things.

First, **one old long sleeved shirt to use as a paint shirt** in art class.

Everyone needs one if they want to paint or work with clay and every one of the elementary kids tell me that these are their favorite art mediums.

Second, go online and **register** your child on the **Artsonia.com web site**. Once your child is registered, you and anyone you choose can view your student's artwork online in the largest online student art gallery. Artsonia is a wonderful resource for you and your family. It also allows you to purchase products with your artist's work featured. One of my favorite items are the sets of note-cards. Their products are a great way to show your child that you appreciate their efforts. Artsonia products make unique gifts as well. Check it out.

Art for elementary will take place the first semester of the 2023-24 school year. The art room has been overhauled with a new floor and a new ceiling and it looks pretty good for an old stage space.

I have been working many hours this summer getting ready for your children. Supplies are in, bulletin boards up, and lesson plans and projects lined up.

It will be a great year for visual art. Tell your kids I am looking forward to seeing them soon.

Mrs Eiken



4K LEARNING

Spring Grove Schools will be offering 4K programming, Monday - Thursday. If you are interested in having your child attend (\$195/month), please contact Ms. Bergsgaard (bethany.bergsgaard@springgrove.k12.mn.us), the school office. (507-498-3221) or fill out the application form that is on the last pages of this Lions Roar. \$25 must accompany the application. There are scholarship opportunities for 4K.

Also, this year, we are a Head Start site, and we have seats available. Parents need to complete a Head Start application form and need to be approved by Head Start.

If the family is not eligible for Head Start, we have a couple of other options for scholarships. Spring Grove is approved for Pathway II Scholarships for 2023-24. Pathway II Scholarships come directly to the district for distribution to qualified students.

Pathway I scholarships are also available for students, but those are awarded by Families First.

If you have a four-year old, don't let them miss this opportunity for in depth learning and experiences with peers and the community.

More information can be found [here](#), on the 4K website page.

Ms. Bergsgaard will be available during assessment days for meet and greet.

SpringGrove

2023-24 6-12 Grade

SCHOOL SUPPLY LIST

ALL 9-12 Grade Students:

Writing Utensils (pens, pencils)
Notebook & Folders for Each Class
Headphones/or Earbuds
(make sure they are compatible with MacBook Air)

Give to one of your teachers on first day:

- Box of Kleenexes
- Ream of "Xerox" paper

6th, 7th & 8th Grade Students

Backpack
Pencils
Pens
Highlighters
Packet of Post-It Notes (3x3)
\$2 to the school for Math Notebook
Dry Erase Markers & Eraser
1" 3 ring binder
Pencil Box or Zippered Pencil Pouch
Notebooks
2 to 4 Folders
Colored Pencils OR Markers
2 Glue Sticks
Headphones/Earbuds
(make sure they are compatible with MacBook Air)

Give to one of your teachers on first day:

- Box of Kleenexes
- Ream of "Xerox" paper

PE 7/8

Tennis Shoes
Athletic Wear
Deodorant

6 - 8 Grade Science

Notebook
Folder
Glue sticks
Markers or colored pencils
Headphones
Scissors *(optional but very handy)*

Art Classes 7-8

(Sem 2)

2 #2 pencils
pink pearl eraser
folder
20 sheets of copy paper
notebook (can share with
another class)

Choir/Music 7-12

Headphone/earbuds

Band 7-12

Band Instrument
Band Punch Cards purchase
from office (\$10 & \$20 increments)
Pencil

Art Classes 9-12

(Sem 2)

2 #2 pencils
pink pearl eraser
folder
notebook
(can share w/ another class)
sketchbook at least 9 x 11"

English 9-12

Markers or Colored Pencils
Scissors
Glue Stick
3x3 Post-It Notes

Biology

Composition or Lab Notebook
Colored Pencils

Spanish

Notebook
2-Pocket Folder
Writing Utensils that do not match

Computer Application/ Business Classes

Notebook and Folder
For Accounting Class a Calculator

Math Classes 9-12

Box of Dry Erase markers
*(if you wish to use an individual
white board in class)*
Scientific Calculator
(Texas Instrument TI-36X Pro)

Health/PE 9 & Lifetime Fitness

Tennis Shoes
Athletic Wear
Deodorant
Notebook/Folder
Pens

Advance PE

Tennis Shoes
Athletic Wear
Deodorant

Human Anatomy & Physiology

Headphones
Notebook
Folder
Markers or
colored pencils
Glue sticks

Spring Grove

ELEMENTARY SCHOOL SUPPLY LIST 2023-24

PLEASE REUSE any supplies that are in good condition from the previous year.

GRADE	4K	Kinderg arten	First	First	Second	2/3	Third	Fourth	Fourth	Fifth	Fifth
TEACHER	Bergs- gaard	Solberg/ Bjerke	Becker	Bratland	Tollefsrud	Schultz	Morken	Strand	Parker	Grinde	Hammel
Paint Shirt		1*	1	1	1	1	1	1	1	1	1
Water Bottle	1	1*	1	1	1	1	1	1	1	1	1
Box of Kleenex		1	1	1	1	1	1	1	1	2	1
Pencil Box or Pencil Pouch		Pencil Box*	Pencil Box	Pencil Box	1	1	1	pencil box	1	1	1
Quality Scissors		1*	1	1	1	1	1	1	1	1	1
Spiral Notebook, Wide Ruled			2	1	2		1	2	4	2	5
Composition Notebook				1	1	3		2	1		1
1" 3-ring Binder		1*	1					1	1	1	1
2-Pocket Folder	1	1-Plastic	2-Plastic	2-Plastic	2	2-Plastic	4	6	5		5
Headphones		1*	1	1	1	1	1	1	1	1	1
Pencils (#2) with Erasers		10	10 to 12	10-12	10 to 12	10 to 12	10 to 12	10 to 12	10 to 12	10 to 12	10 to 12
Extra Erasers							1	1	1		1
Black OR Blue Pen								2	2		2
Red Pen										1	
Crayons--Box, no more than 24		1Box of 24	2 Boxes of 24	1 Box	1 Box	1 Box	1 Box				or colored pencils
Colored Pencils						1 box		1 box	1 box	1	or crayons
Crayola Markers		1 Box	1 Box	1 Box	1 Box	1 Box	1 Box	1 Box	1 Box		1 Box
Crayola Water Color Paints -set of 8		1									
Play Dough	X (optional)	2 containers	2 containers	2							
Expo Dry Erase Markers		2	4	4	4	4	4	4	4	4	4
Dry Eraser								1	1		
Highlighter								4	4	1	1
Elmer's Glue (7.6 oz or larger)						1			1		
Elmer's Glue Sticks		10	10	4	2	4	2	12	8		4
Ruler					1		1				1
Scotch Tape					1	2	1				1
Post it Notes 3"					1	2		2	2	1	1
Box of 1-Gal Ziploc Bags						1		1	1		
Backpack or School Bag	X	1*	1	1		1	1	1	1		1
Student Planners					1**	1**	1**	1**	1**	1**	1**
Clorox Wipes		X		1	1	1	1	1	1		1
OTHER	Extra Set of Clothes	Towel for rest time								Band Instrument/ Lesson Book	

* label with student name

** purchase Elem Student Planners from school office.
2nd -- 4th Grade \$4 / 5th & 6th grade \$4.25

Does your child have health insurance?

If not, help may be available.

Minnesota Health Care Programs have free and low-cost health insurance for children and families who qualify.

Your child may qualify if your household income is below:

Family size	Monthly income	Yearly income
2	\$4,519	\$54,230
3	\$5,697	\$68,365
4	\$6,875	\$82,500
5	\$8,052	\$96,635

Income is one factor for qualifying. Other rules and limits apply. For more information, call your county office or visit <http://mn.gov/dhs/people-we-serve/adults/health-care/>. These income limits are valid until June 30, 2024.

To get a MNsure application for health coverage and help paying costs (DHS-6696):

- Print one from <http://mn.gov/dhs/people-we-serve/adults/health-care/>
- Call 877-KIDS-NOW toll free

- Call



SPRING GROVE SCHOOLS

113 2nd Ave NW • Spring Grove, Minnesota 55974 | 507.498.3221 | Fax 507.498.3470

Dear Parent/Guardian:

Our school offers healthy meals each day. Starting school year 2023-24, we are joining Minnesota's Free School Meals Program. All students can get one breakfast and one lunch free of charge each day at school. Although no application is required to receive this free meal benefit, filling out the Application for Educational Benefits is still important! Your child(ren) may qualify for other benefits like reduced fees at school. Your application may also help the school qualify for education funds, discounts, and other meal programs.

To apply, complete the enclosed Application for Educational Benefits and return it to: **Spring Grove Public Schools, Attn: Tanya Elton, 113 2nd Ave NW, Spring Grove MN, 55974**

Who should complete this application? Children in households participating in the Supplemental Nutrition Assistance Program (SNAP), Minnesota Family Investment Program (MFIP) or Food Distribution Program on Indian Reservations (FDPIR), and foster, homeless, migrant and runaway children qualify without reporting household income. Alternatively, children can qualify if their household income is within the maximum income shown for their household size on the instructions.

COMMON QUESTIONS:

I get WIC or Medical Assistance. Can my children qualify? Children in households participating in WIC or Medical Assistance do not automatically qualify. Children may be eligible depending on other household financial information. Please fill out an application.

Who should I include as household members? Include yourself and all other people living in the household, related or not (such as grandparents, other relatives, or friends).

May I apply if someone in my household is not a U.S. citizen? Yes. You or your children do not have to be U.S. citizens for you to complete an application.

What if my income is not always the same? List the amount that you normally get. If you normally get overtime, include it, but not if you get overtime only sometimes. For seasonal work, write in the total annual income.

Will the income information or case number I give be checked? It may be. We may also ask you to send written proof.

How will the information be kept? Information you provide on the form, and your child's approval, will be protected as private data. For more information, see the back page of the Application for Educational Benefits.

If I don't qualify now, may I apply later? Yes. Please complete an application at any time if your income goes down, your household size goes up, or you start getting SNAP, MFIP or FDPIR benefits.

If you have other questions or need help, call Tanya Elton at (507) 498-3221, ext. 103.

Sincerely,

Rachel Udstuen, Superintendent

INDEPENDENT SCHOOL DISTRICT 297

Rachel Udstuen
Superintendent

Gina Meinertz
Assistant Superintendent

Luke Kjelland
Principal

How to Complete the Application for Educational Benefits

Complete the Application for Educational Benefits form for school year 2023-24 if any of the following applies to your household:

- Any household member currently participates in the Minnesota Family Investment Program (MFIP), or the Supplemental Nutrition Assistance Program (SNAP), or the Food Distribution Program on Indian Reservations (FDPIR) or
- The household includes one or more foster children (a welfare agency or court has legal responsibility for the child) or
- The total income of household members is within the guidelines shown below (**gross earnings before deductions**, not take-home pay). Do not include as income: foster care payments, federal education benefits, MFIP payments, or value of assistance received from SNAP, WIC, or FDPIR. Military: Do not include combat pay or assistance from the Military Privatized Housing Initiative. The income guidelines are effective from July 1, 2023 through June 30, 2024.

Maximum Total Income

Household size	\$ Per Year	\$ Per Month	\$ Twice Per Month	\$ Per 2 Weeks	\$ Per Week
1	26,973	2,248	1,124	1,038	519
2	36,482	3,041	1,521	1,404	702
3	45,991	3,833	1,917	1,769	885
4	55,500	4,625	2,313	2,135	1,068
5	65,009	5,418	2,709	2,501	1,251
6	74,518	6,210	3,105	2,867	1,434
7	84,027	7,003	3,502	3,232	1,616
8	93,536	7,795	3,898	3,598	1,799
Add for each additional person	9,509	793	397	366	183

Step 1: Children

List all infants and children in the household, their school and grade if applicable, and birthdate. Attach an additional page if needed to list all children. Check the box if a child is in foster care (a welfare agency or court has legal responsibility for the child).

Step 2: Case Number

If any household member currently participates in SNAP, MFIP or FDPIR, write in the case number and then go to Step 4. If you do not participate in any of these programs, leave Step 2 blank and continue on to Step 3.

Step 3: Adult and Child Incomes / Last 4 Digits of Social Security Number

- Social Security Number/Total Household Members.** An adult household member must provide the last four digits of their Social Security number or check the box if they do not have a Social Security number. Report the total number of household members and ensure all household members are listed individually on the application in the child or adult section as applicable.
- Child Income.** If any children in the household have regular income, such as SSI or part-time jobs, list the total amount of regular incomes received by all children, and check the box for the frequency: weekly, bi-weekly, twice a month, or monthly. Do not include occasional earnings like babysitting or lawn mowing.
- Adult income.** Report the names of adult household members and income earned in this section.
 - List all adults living in the household not listed in Step 1, whether related or not, such as grandparents, relatives, or friends.
 - Gross Earnings from Work.** This is usually the money received from working at jobs where a paycheck is received. For each income, check the box to show how often the income is received: weekly, bi-weekly, twice per month, or monthly.
 - List gross incomes before deductions, not take-home pay. Do not list an hourly wage rate. For adults with no income to report, enter a '0' or leave the section blank. For seasonal work, write in the total annual income.
 - Are you Self-Employed or a Farmer?** List the net income per month or year after business expenses. Do not list the same income twice on the application. A loss from farm or self-employment must be listed as 0 income and does not reduce other income.
 - Any Other Gross Income.** List gross incomes before deductions from all other sources, such as SSI, unemployment, child support, public assistance, social security, rental income or annuities.

Step 4: Signature and Contact Information An adult household member must sign the form. If you do not want your information to be shared with Minnesota Health Care Programs, check the "Don't share" box in Step 4.

Optional: Please provide the information on ethnicity and race that is requested on the second page of the form. This information is not required and does not affect approval for school meal benefits. The information helps to ensure we are meeting civil rights requirements and fully serving our community.

2023-24 Application for Educational Benefits

Complete one application per household for all children. Please use pen (not a pencil). **Mail or return completed form to: (School/District Information) Spring Grove Public Schools, Attn: Tanya Elton**

STEP 1: List ALL Household Members who are infants, children, and students up to and including grade 12 (if more spaces are required for additional names, attach another sheet of paper).

Definition: A Household Member is "Anyone living with you and shares income and expenses, even if not related." Read *How to Complete the Application for Educational Benefits* for more information. Adults over grade 12 living in the same household should be reported in Step 3. If your children attend different districts or charter/nonpublic schools, return an application at each one.

Child's First Name (list all children in household)	MI	Child's Last Name	School	Grade	Birthdate	Foster Child (Y)
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>

STEP 2: Do Any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, MFIIP or FDIPIR? Medical assistance does not qualify. If NO > Go to STEP 3.

If YES > Enter SNAP, MFIIP or FDIPIR Case Number (between 4-9 digits, do not report EBT card number) _____ then go to STEP 4. (Do not complete STEP 3)

STEP 3: Report Income for ALL Household Members (Skip this step if you answered 'Yes' to STEP 2)

A. Last Four Digits of Social Security Number (SSN) of Adult Household Member: XXX-XX-____ Or Check if Adult has No SSN: ☐ Total Number of All Household Members (Children + Adults) ☐

B. Child Income.

Sometimes children in the household earn or receive income, such as from a part time job or SSI. Please include the TOTAL income received by all children listed in STEP 1. Do not include income received by adults in the box to the right.

Total Income Received by All Children	Weekly	Bi-weekly	2x Month	Monthly
\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. All Adult Household Members (including yourself). For each Household Member listed, if they do receive income, report total gross income only. If they do not receive income from any source, write '0' or leave any fields blank. You are certifying (promising) that there is no income to report. Not sure what income to include here? Flip the page and review "Sources of Income" for information. "Sources of Income" will help you with the Child Income section and All Adult Household Members section.

Names of All Adult Household Members (First and Last)	Gross Earnings from Working at Jobs				Report income before deductions or taxes in whole dollars (no cents).	Are you Self-Employed or a Farmer?		Any Other Gross Income					
	Weekly	Bi-weekly	2x Month	Monthly		Monthly	Yearly	Net income from Farm or Self-Employment. Do not duplicate elsewhere.	Weekly	Bi-weekly	2x Month	Monthly	SSI, Unemployment, Public Assistance, Child Support, and others on Page 2
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$

STEP 4: Contact information and adult signature. "I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and that school officials may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws."

☐ I have checked this box if I do not want my information shared with Minnesota Health Care Program as allowed by state law.

Printed name of adult signing form	Daytime Phone
Address (if available)	Ap# City Zip

SIGN HERE: Signature of Household Adult _____ **Date** _____

Do Not Fill Out: For School Office Use Conversions to Annualize All Income:	Weekly	X52	Bi-weekly	X26	2X Month	X24	Monthly	X12	Annualize	X1	Verified? Attach Tracker	No change	Free After Verified	Reduced After Verified	Denied After Verified
All Total Income (include child and adult income)	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Household Size:	Categorical Eligibility	Free	Reduced	Denied
Determining Official Signature: _____ Date: _____ Confirming Official Signature: _____ Date: _____															

OPTIONAL: Children’s Racial and Ethnic Identities

We are required to ask for information about your children’s race and ethnicity. This information is important and helps to make sure we are fully serving our community. Responding to this section is optional and does not affect your children’s eligibility. Respond to both Step One, *Ethnicity* and Step Two, *Race*.

Step One: Ethnicity (check one): ☐ Hispanic or Latino ☐ Not Hispanic or Latino

Step Two: Race (check one or more): ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White

INSTRUCTIONS: Sources of Income

Sources of Income for Children		Sources of Income for Adults		
Sources of Child Income	Examples	Earnings from Work	Public Assistance / Alimony / Child Support	All Other Income
<ul style="list-style-type: none">Earnings from workSocial Security<ul style="list-style-type: none">Disability PaymentsSurvivor’s BenefitsIncome from person outside the householdIncome from any other source	<ul style="list-style-type: none">A child has a regular full or part-time job where they earn a salary or wagesA child is blind or disabled and receives Social SecurityA Parent is disabled, retired, or deceased, and their child receives Social Security benefitsA friend or extended family member regularly gives a child spending moneyA child receives regular income from a private pension fund, annuity, or trust	<ul style="list-style-type: none">Salary, wages, cash bonuses (before deductions or taxes)Net income from self-employment (farm or business)If you are in the U.S. Military:<ul style="list-style-type: none">Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances)Allowances for off-base housing, food and clothing	<ul style="list-style-type: none">Cash Assistance from State or local governmentSupplemental Security IncomeUnemployment benefitsWorker’s compensationAlimony paymentsChild support paymentsVeteran’s benefitsStrike benefits	<ul style="list-style-type: none">Social SecurityDisability benefitsRegular income from trusts or estatesAnnuitiesInvestment incomeRental incomeRegular cash payments from outside household

The **Richard B. Russell National School Lunch Act** requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPRI) case number or other FDPRI identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.

At public school districts, each student’s school meal status also is recorded on a statewide computer system used to report student data to MDE as required by state law. MDE uses this information to: (1) Administer state and federal programs, (2) Calculate compensatory revenue for public schools, and (3) Judge the quality of the state’s educational program.

Nondiscrimination statement: In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA’s TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant’s name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted 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; or
- (2) **fax:** (833) 256-1665 or (202) 690-7442; or
- (3) **email:** program.intake@usda.gov

This institution is an equal opportunity provider.

4K STUDENT REGISTRATION & ENROLLMENT FORM

SPRING GROVE PUBLIC SCHOOLS

GENERAL INFORMATION & INSTRUCTIONS:

This registration form must be completed by the parent/guardian of the child. Please PRINT the information.

CHILD IDENTIFICATION INFORMATION

Child's Legal Name <i>(First, Middle, Last)</i>		
Child's Birthdate	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Grade
Primary Contact		Relationship <i>(mom & dad, mom, dad, guardian)</i>
Primary Address		
City	State	Zip Code
Primary Email		PASSWORD -- If brand new to Spring Grove Schools, please submit a Password for JMC. JMC is our school software for lunch accounts, grades, attendance, etc.

EMERGENCY CONTACTS

PHONE NUMBER	NAME	RELATIONSHIP <small>(mom, dad, uncle, aunt, etc)</small>	TYPE
			<input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Other _____
			<input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Other _____
			<input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Other _____
			<input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Other _____

PREVIOUS HEALTH & DEVELOPMENTAL SCREENING INFORMATION

Has your child received a comprehensive health and developmental screening as a preschooler (3-5 years old)? ☐ YES ☐ NO

If YES, screening date: _____ WHERE: _____

Has your child ever been evaluated for special education or ever received special education services through an Individual Education Plan (IEP), Individual Family Service Plan (IFSP) or Individual Interagency Intervention Plan (IIIP)? ☐ YES ☐ NO

☐ I give the Spring Grove School District permission to administer sunscreen & insect repellent as needed.

HEALTH HISTORY: _____

ALLERGIES: _____

MEDICATIONS: _____

Other Health Issues: _____

SIBLINGS: Please list names and dates of birth of other brothers and sisters living in the household

Name	Birthdate

*You are not done yet!
Please complete
the back —→*

PRIMARY/SECONDARY LANGUAGE INFORMATION

Which Language did your child learn first?

☐ English ☐ Other (specify): _____

Which language is most often spoken in your home?

☐ English ☐ Other (specify): _____

Which language does your child usually speak?

☐ English ☐ Other (specify): _____**RACIAL/ETHNICITY**

- ☐ Hispanic-Latino
☐ American Indian-Alaskan Native
☐ North American Indian
☐ Asian
☐ Black-African American
☐ Hawaiian/Pacific Islander
☐ White

ENROLLMENT

Classes fill up quickly. Please register early to ensure a spot in our program.

Which session would you prefer? (must be 4 years old by September 1st)

	A.M. Session 8:15 - 11:15 a.m. (M - Th)	\$195/month
	P.M Session 12:15 - 3:15 p.m. (M - Th)	\$195/month

*** Payments will be due the 5th of the month.*There is a **\$25 registration fee.***All checks payable to: Spring Grove Public Schools***PERSONS AUTHORIZED TO PICK UP CHILD:**

Name _____ Phone _____

Address _____

Name _____ Phone _____

Address _____

Name _____ Phone _____

Address _____

Under no circumstances will a child be released to anyone not known to the school without authorization from parents or guardians.**TRANSPORTATION**

Midday in-town transportation (drop-off after morning session or pick-up for afternoon session) will be available for a fee. Would you like this transportation? _____ Yes _____ No

PARENT/GUARDIAN VERIFICATION OF INFORMATION

I hereby verify that the above information is true and correct to the best of my knowledge.

Signature -- Parent/Legal Guardian_____
Date

Please send completed application and \$25 registration fee to:
Spring Grove Public Schools, 113 2nd Ave NW, Spring Grove, MN 55974