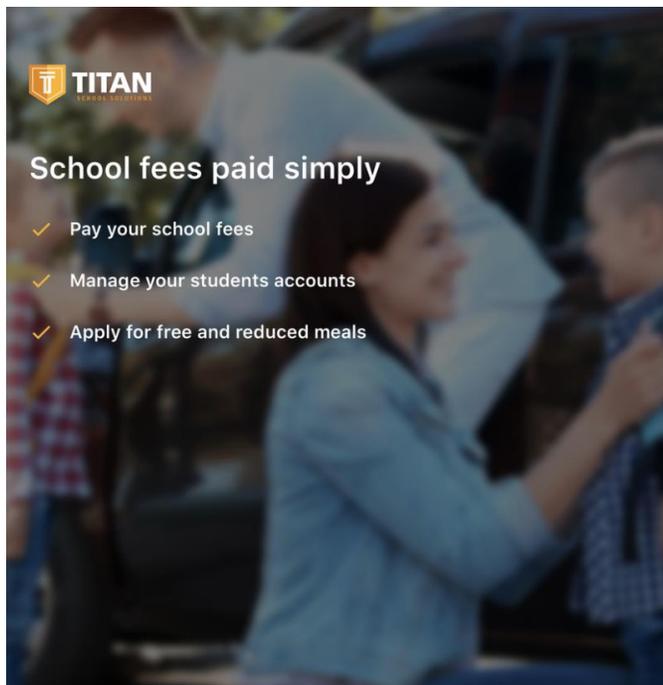


Parent Portal

How to Guide for Free and Reduced Meal Applications

Titan family portal can be used to apply for free and reduced meal benefits. The parent or guardian can submit the information that is required by the USDA to allow the district to process the application through <https://family.titank12.com> . Once you have submitted the required information you will receive a Reference Code that will allow you to track your submitted application.

The submitted application will then be process by your school district to validate and process using the USDA guidelines.



Log In

Don't have an account? Sign up Today!

Or

Check District Menu

Apply for free and reduced meal assistance without logging in

Apply For Meals Today Solicitar Comidas Hoy

Áp dụng cho bữa ăn

© 2014-2019 Titan School Solutions® All Rights Reserved, Version 1.2.0.172-prod.
Terms of Use and our Privacy Policy

Access the <https://family.titank12.com> from any device that has a browser.

Each page will allow you to only move to the next step once you have submitted the information that is required by your district.

Please add all students that are currently enrolled at the school district to one submitted application to ensure that your application is processed with your household information.

Submitting your application for Free or Reduced meals

In any device that has a browser go to <https://family.titank12.com/LD5EAQ>

Select Apply Today

A pop up window will appear with information about No Cost Meals for those CEP sites

Press ok

1. General Info:

School District will auto populate

Household Street Address:

Enter the Household Street Address, City, State and Zip Code

District

Glendale Elementary School District #40 (Arizona) ✕

Household street address

Address

City

State

Arizona ▾

Zip

Daytime Phone Number and Email Address:

Enter Daytime phone number and email address

Daytime phone number and email address

Phone

Email

Assistance Program:

If anyone within the household receive SNAP, TANF and/or FDPIR

Please choose the appropriate Assistance Program from the drop down

Provide a Case Number (Numbers Only)

Assistance Program

Case Number

Click Next

If an Assistance Program is selected, there will be no Household Information section as it is not required when an Assistance Program is selected and a Case number has been provided.

2. Letter to Household:

Your district has provided a Letter to Household on how to apply for Free and Reduced Meals. Once you have reviewed the letter to household select Next.

GLENDALE ELEMENTARY SCHOOLS DISTRICT

Dear Parent/Guardian:

Children need healthy meals to learn. **Glendale Elementary School District** offers healthy meals every school day. **Breakfast meals are at no charge and lunch costs \$1.65. Your children may qualify for free meals or for reduced-price meals.** Reduced-price for is lunch **.25¢**. This packet includes an application for free or reduced-price meal benefits, as well as a set of detailed instructions. Below are some common questions and answers to help you with the application process.

1. WHO CAN GET FREE MEALS?

- All children in households receiving benefits from **SNAP, FDPIR (Food Distribution Program on Indian Reservations)** or **TANF**, can get free meals regardless of your income.
- Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals.
- Children participating in their school's Head Start Program are eligible for free meals.
- Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
- Children can get free or reduced-price meals if your household's gross income is within the limits on the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced-price meals if your household income falls at or below the limits on this chart.

Household Size	Yearly Income	Monthly Income	Weekly Income
1	\$23,107	\$1,926	\$445
2	\$31,284	\$2,607	\$602
3	\$39,461	\$3,289	\$759
4	\$47,638	\$3,970	\$917
5	\$55,815	\$4,652	\$1,074
6	\$63,992	\$5,333	\$1,231
7	\$72,169	\$6,015	\$1,388
8	\$80,346	\$6,696	\$1,546
Each additional person:	+\$8,177	+\$682	+\$158

- ### 2. HOW DO I KNOW IF MY CHILDREN QUALIFY AS HOMELESS, MIGRANT, OR RUNAWAY?
- Do the members of your household lack a permanent address? Are you staying together in a shelter, hotel, or other temporary housing arrangement?

3. Students:

You will click **Add Student**

A pop up widow will appear

Please submit as much information about your student as possible. This will ensure that the district matches your student to the district data.

Enter First Name, Middle Name (if applicable), Last Name, Student ID, School, Date of Birth, Grade and check if the Child is Foster, Head Start, Homeless, Migrant and/or Runaway.

Once all the required information is filled out, Click Save

Student ×

First Name	Middle Name	Last Name
<input type="text" value="d"/>	<input type="text"/>	<input type="text"/>
Student Id	School	
<input type="text"/>	<input type="text" value=""/>	
Date of Birth	Grade	
<input type="text" value=""/>	<input type="text" value=""/>	
<input type="checkbox"/> Foster	<input type="checkbox"/> Head Start	<input type="checkbox"/> Homeless
<input type="checkbox"/> Migrant	<input type="checkbox"/> Runaway	
		<input type="button" value="Cancel"/> <input type="button" value="Save"/>

If you have more students enrolled at this school district, please select **Add Student** and enter the student's information.

If any of the students earn income, please include the total income and the frequency.

Sometimes students in the household earn income. Please include the TOTAL income earned by all students

Student Income

How often?

Click Next

4. Household:

Note: This section will not be visible when an Assistance Program is selected and a Case number has been provided.

Enter the total household members. This includes all students, all adults and any children within the household.

For every household member and child not previously added in the Students section please do the following:

Click **Add Household Member**

A pop up box will appear

Include First Name, Last Name and their income (if applicable)

Household Member ✕

First Name	Last Name	
<input type="text" value="S"/>	<input type="text"/>	

Report total income for each source in whole dollars only. If no income is received from any source leave the fields blank, you are certifying (promising) that there is no income to report

	Wage	How often?
Work	<input type="text"/>	<input type="text" value="v"/>
Welfare, Child Support, Alimony	<input type="text"/>	<input type="text" value="v"/>
Pension, Retirement, Other	<input type="text"/>	<input type="text" value="v"/>
Unemployment	<input type="text"/>	<input type="text" value="v"/>

Click Save

If there are more household members within the household, please select **Add Household Member** and enter the required information.

Once all Household Members and their incomes are in, click Next.

5. Review:

Please review this information. This is a preview of all the information you have entered. If there is something that needs to be Edited or information that needs to be added, please click on Edit of any section and update. Once you have reviewed the information, click Next.

Review

Please review the entered information before continuing to submit the application

General [Edit](#)

Glendale Elementary School District #40

English

Adult Signer Information [Edit](#)

No Information Provided

Student Information [Edit](#)

NAME	DATE OF BIRTH	SCHOOL	GRADE
Ana Navey Reyes	Jan 17, 2006	Discovery School	8th

\$0.00 Annually

Household Information [Edit](#)

Total Household Members

NAME	TOTAL WAGES
s a	\$1,200.00 Every Other Week

[Back](#)

[Next](#)

6. Sign & Submit:

Demographics: Please enter the Ethnicity and Race. This information is optional.

Demographics

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 childrens eligibility for free or reduced price meals

Ethnicity

Race

Sign:

Type in the name of the adult completing this Online Free/Reduced Meal Application

Click on box "I agree to the Terms of Use"

Enter the last four digits of SSN or click on box "No SSN"

Once this is done Click Submit

Enter the name of the household member completing the application.

"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."

Signed By
 I agree to the Terms of Use

Last 4 digits of SSN
 No SSN

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 (FDPIR) case number or other FDPIR 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.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

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.

This institution is an equal opportunity provider.

Application Submitted:

You will receive a Reference Code. If you need to check on your submitted application the district can match your application with this code.

Application Submitted, Reference Code: KF7-Z4K-TDT

Thank you for submitting your application, you will receive a letter informing you of the status of your application once it has been processed.

Academic Year

2019/2020

Annual Income

[REDACTED]

NAME	DATE OF BIRTH	SCHOOL	GRADE
[REDACTED]	[REDACTED]	[REDACTED]	8th

Click [Here](#) to sign up for an account. Or [go back](#) to the home screen.