



Consent for Disclosure
Permission to Share Free and Reduced Information with
Other District Programs for Waived Fees

Dear Parent/Guardian:

You do not have to sign or send in this form to get reduced price or free Child Nutrition Program benefits for your children. If you do not sign the Consent for Disclosure, it will not affect eligibility for or participation in the Child Nutrition Programs.

To save you time and effort, information about your children's eligibility for reduced price or free Child Nutrition Program benefits may be shared with other programs for which your children may qualify. For the programs listed below, we must have your permission to share your students' status.

Yes, I DO want school officials to share my children's eligibility for Child Nutrition Program benefits only with the programs I have checked below for the purpose of waived fees.

- | | |
|--|--|
| <input type="checkbox"/> <u>Curriculum Fees (including Driver's Education)</u> | <input type="checkbox"/> <u>Scholarship Information*</u> |
| <input type="checkbox"/> <u>Instrument Rental Fees</u> | <input type="checkbox"/> <u>Athletic Fees</u> |
| <input type="checkbox"/> <u>Maize Early Childhood Center Tuition</u> | |

If you checked yes to any or all of the boxes above, fill out the form below. Your information will be shared only with the programs you checked.

Child's Name: _____ School: _____

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Child's Name: _____ School: _____

Child's Name: _____ School: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Address: _____

For more information, please contact: Maize Food Service, 316.722.0900, foodservice@usd266.com

Return this form to: Maize Educational Support Center, Food Service, 905 W. Academy Maize KS 67101 or foodservice@usd266.com

* allows school personnel to share scholarship opportunities to eligible students

This institution is an equal opportunity provider.