

2022 Rural Delivery Meals Program Application

Please complete the questions below for the rural delivery meals program.

Name of Applicant:	Current Address:
Name of Child(ren):	
Telephone Number Where You Can Be Reached:	

1. Is your household income within 200% of the Federal Poverty Level? (see chart below for income guidelines)

Please circle the correct response:	Yes	No
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2. By signing this application, you are verifying that you have granted approval for your child(ren)'s participation in this program and verify that the above answers are correct.

Parent or Legal Custodian Signature

Date

Family Size	Federal Poverty Guidelines 200%*
1	\$2,265
2	\$3,052
3	\$3,838
4	\$4,625
5	\$5,412
6	\$6,198
7	\$6,985
8	\$7,772
9	\$8,558
10	\$9,345
11	\$10,132
12	\$10,918

*Monthly income must not exceed this amount based on family size (before taxes).

<p>For Staff Use:</p> <p style="text-align: center;">Application Approved Application Denied</p> <p>Name of Staff processing form:</p> <p>_____</p> <p>Date: _____</p>
