

**NATIONAL SCHOOL LUNCH PROGRAM
INCOME ELIGIBILITY GUIDELINES FOR FREE MILK
Effective FROM July 1, 2009 to June 30, 2010**

FREE

HOUSEHOLD SIZE	ANNUAL	MONTHLY	TWICE PER MONTH	EVERY TWO WEEKS	WEEKLY
1	14,079	1,174	587	542	271
2	18,941	1,579	790	729	365
3	23,803	1,984	992	916	458
4	28,665	2,389	1,195	1,103	552
5	33,527	2,794	1,397	1,290	645
6	38,389	3,200	1,600	1,477	739
7	43,251	3,605	1,803	1,664	832
8	48,113	4,010	2,005	1,851	926
For each additional family member add:	+4,862	+406	+203	+187	+94

A. All applications qualified by income must have:

1. All household members listed.
2. Income by household member, source and how often the income is received (weekly, monthly, etc.)
3. The Social Security Number of the primary wage earner or adult who signs the application or box checked if they do not have a Social Security No.
4. An adult household member's signature.

ANNUAL INCOME COMPUTATION

Multiply:

- Weekly** income by 52
- Every two weeks** income by 26
- Twice monthly** income by 24
- Monthly** income by 12

B. All applications qualified by Food Stamp, Temporary Assistance for Families in Idaho (TAFI), or Federal Distribution Program for Indian Reservations (FDPIR) number must have:

1. Name of the child receiving benefits and a correct benefit number; and
2. An adult household member's signature.