Free and Reduced Application Instructions

Log into Infinite Campus, parent portal:

https://nspcsa.infinitecampus.org/campus/portal/parents/freedom_classical.jsp?status=logoff

After login, select: More, Meal Benefits, Meal Benefits Application

NOTE: New students, please wait until the first week on campus to obtain a login.

| Infinite C Campus | | A 1 |
|---|---|-----|
| Home | More | |
| Calendar Assignments Grades Grade Book Undates | Family Information Quick Links Health Freedom Classical Academy Important Dates Freedom Classical Academy K-8 | |
| Attendance Schedule Food Service Fees School Store Activity Registration Documents Message Center More | Meal Benefits Online Registration | |
| | | |
| = Campus | | ÷ . |
| Home | K Back | |
| Calendar Fees School Store Message Center More | Meal Benefits Application Click here to start the application process. Meal Benefits Application | |

Application Steps

Step 1 of 12

Please read through the "Letter to Household". This is informational. Once you are done, select "Next" to continue.

Step 2 of 12

Please read through the "How to Apply for Free and Reduced Priced Student Meals". This is informational. Once you are done, select "Next" to continue.

Step 3 of 12

You are confirming the items in red below including the person completing the application and the household address. Once you are done, select "Next" to continue.



Step 4 of 12

You are confirming household members here by selecting the "Household Member" box. If someone isn't listed then select the "Add Household Member" box to add them. If someone is listed that no longer lives in the household, then just DO NOT select the "Household Member" box next to their name. Once you are done, select "Next" to continue.

| Household Members (Step 4 of 12) | | |
|---|---|--|
| Household Members are listed below. You must confirm each p your household, do not check the box next to their name. If the are not allowed to edit existing household member information | person living in your household by selecting the check box next to re are persons missing from your household you will need to add i or uncheck the application signer. After you have identified and/o | their name. If a person listed below is no longer living in them by selecting the 'Add Household Member' button. You or added household members select 'Next' to continue. |
| | | ☑ Household Member |
| | | ☑ Household Member |
| | Freedom Classical Academy K-8 (05) | ☑ Household Member |
| | | ☑ Household Member |
| Add Household Member | | |

Step 5 of 12

If any household members receive benefits (SNAP, TANF, or FDPIR) this is where you would select "Yes" and enter the case number. If no one receives benefits then select "No". Once you are done, select "Next" to continue.

Step 6 of 12

Here you will select the "Child" box if anyone in the household listed is 18 or under AND are supported with the household's income. Additionally, select the "Student" box if anyone in the household listed is a currently enrolled student at Freedom Classical Academy. Once you are done, select "Next" to continue.

| Children (Step 6 of 12) | | | | | | |
|---|--------------------|--|--|--|--|--|
| Child Members of the household must be confirmed by selecting the check box next to their name. Children are those members age 18 or under AND are supported with the household's income. After you have identified each child member, select 'Next'. | | | | | | |
| | | | | | | |
| SIGNER | | | | | | |
| | Child Student | | | | | |
| Freedom Classical Academy K-8 | (05) Child Student | | | | | |
| | Child Student | | | | | |

Step 7 of 12

Confirm any children that are foster children here. Note: You will have to enter income received if any children are identified as foster children. Once you are done, select "Next" to continue.

Step 8 of 12

Confirm any students that are Migrant, Homeless or Runaway. Once you are done, select "Next" to continue.

Step 9 of 12

Here you are entering the income for each household member by selecting the "Add Income" box or mark the "No Income" box if a household member does not have income contribution. Please refer back to the "Letter to Household" from step 1 if you have questions on reporting income. Note: As a general rule, income is reported as gross income and NOT net income. Once you are done, select "Next" to continue.

Step 10 of 12

Review everything. If you find anything that needs to be updated, select "Previous" to go back in the application process. IF everything is correct, select "Next" to continue.

Step 11 of 12

Input last 4 of SSN or select "I do not have a SSN", then mark ethnicity and race. To complete the application, you will need to select "Yes" to I agree, then "Sign" and "Submit" the application. If you decide to "Decline" signing the application, then you will need to restart the application process or complete a paper application.

| Authorization (Step 11 of 12) | | | | | |
|--|---|--|--|--|--|
| You must respond and read the authorization statement below. By selecting 'Accept' you agree to the authorization statement and you will be taken to the Electronic Signature PIN entry screen to submit the application. By selecting 'Decline' you do not agree to the authorization statement, the application will be cancelled and your information will no longer be available. If you choose to 'Decline' you may enter another application at any time. | | | | | |
| Social Security Number | | | | | |
| The income section of this application has been filled out. You are required to provid do not have a SSN" box. One option is required. * SSN ###-##- #### I do not have a SSN | e the last four digits of your SSN. Please enter the last four digits of your SSN or mark the "I | | | | |
| | | | | | |
| Ethnicity (check one) | Race (check one or more) American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White | | | | |
| Authorization Statement | | | | | |
| I certify (promise) that all information on this application is true and that all income (if information I provide. I understand that school officials may verify (check) the information are constructed. I Agree * No Yes | required) is reported. I understand that the school will receive Federal funds based on the i.on. I understand that if I purposely provide false information, my children may lose benefits, and | | | | |

Step 12 of 12

This gives you the reference # and summary information.

Submitted (Step 12 of 12) Your application has been submitted. Please print this page for your records. This will include the information you provided on your application. A submission notice and final summary report has also been sent to your Portal Process Inbox. You may 'Quit' or safely close out of the application at this time. Thank you for submitting your Meal Benefits Application. Your Reference # is: You will need this number if you have any questions about your Meal Benefits Application. Application review may take up to 10 business days. Please do not submit another online or paper application as this may delay processing. You will be notified of the outcome of your application status. UNTIL YOUR APPLICATION IS PROCESSED, YOU ARE REQUIRED TO PAY FOR YOUR CHILD(REN)'S SCHOOL MEALS. If you have any further questions, please contact Shawna Settles at ssettles@freedomclassical.org.

Submitted (Step 12 of 12)

Your application has been submitted. Please print this page for your records. This will include the information you provided on your application. A submission notice and final summary report has also been sent to your Portal Process Inbox. You may 'Quit' or safely close out of the application at this time.

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End of Application Steps

To view the status of your online application, see Message Center and Inbox.

Once you have submitted your application, the following message will appear in the Message Center Inbox. Click on the message, you may print or save the letter for reference.

| Home | Message Center | | | | | |
|----------------|--|--|--|--|--|--|
| Calendar | | | | | | |
| Fees | Announcements Inbox | | | | | |
| School Store | Your Meal Benefits Application has been processed > 07/11/2024 > | | | | | |
| Message Center | □ Your Meal Benefits Application has been submitted for processing. | | | | | |
| More | | | | | | |

Once your application has been processed (this will occur within 10 business days following submission), the following message will appear in the Message Center Inbox. Click on the message, you may print or save the letter for reference.

| Home | Message Center | | | | |
|----------------|--|---|--|--|--|
| Calendar | | | | | |
| Fees | Announcements Inbox | | | | |
| School Store | Your Meal Benefits Application has been processed 07/11/2024 | > | | | |
| Message Center | Your Meal Benefits Application has been submitted for processing. | | | | |
| More | 07/10/2024 | | | | |

| •• | Application Submitted | |
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| ≗≂ nsp | ocsa.infinitecampus.org/campus/portal/posMessage.xsl?x=fram.FreeReducedPrefere | nce&x=fram.FRAMLette. |
| Messag | e Delete | |
| Subject Date: Messag Your M of the | Your Meal Benefits Application has been processed 07/11/2024 e: deal Benefits Application has been processed. Select 'Print Letter' for a PDF Approval/Denial Letter to explain the outcome of your application. | |
| If you school review contac Print L | | |