## SHARING INFORMATION WITH OTHER PROGRAMS

Dear Parent/Guardian:

To save you time and effort, the information you gave on your Free and Reduced Price School Meals Application may be shared with other programs for which your children may qualify. For the following programs, we must have your permission to share your information. Sending in this form will not change whether your children get free or reduced price meals.

Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with the Catholic Schools Office for Federal Funding of School Programs, example: Title One.

If you checked yes to the box above, fill out the form below to ensure that your information is shared for the child(ren) listed below. Your information will be shared only with the programs you checked.

Child's Name:	School:		
Child's Name:	School:		
Child's Name:	School:		
Child's Name:	School:		
Signature of Parent/Guardian:		Date:	
Printed Name:			
Address:			
For more information, you may call Sonya I sonya.evans@pastoral.org			

## Return this form to: **Diocese of Owensboro 600 Locust Street Owensboro KY 42301** by **August 31**, **2019**.

Non-Discrimination Statement: This explains what to do if you believe you have been treated unfairly.

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