

Supporting Statement for OMB Clearance for the Study of Non-Response to the School Meals Applica

OMB Approval No.: 0584-XXXX
Expiration Date: XX/XX/20XX

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sp
valid OMB control number for this information collection is 0584-XXXX. The time req
instructions, searching existing data sources, gathering and maintaining the data nec

Household ID	Houshold size	Household monthly income	Number of students in household (enrolled at the time the verification sample was selected)
1234	4	\$3,500	2
1234	4	\$3,500	2
1235	6	\$3,000	3
1235	6	\$3,000	3
1235	6	\$3,000	3
1236	2	\$2,500	1

Information Verification Process - Appendix 18 - Verification Data Request Template

ponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The time required to complete this information collection is estimated to average 3.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Name of student in household	School of student in the household	Grade level of student in household
Mary Jones	New York Public Elementary	4
Mike Jones	New York Public Middle School	6
Jane Smith	St. Louis Middle School	5
Jerry Smith	St. Louis High School	11
Joan Smith	St. Louis High School	9
Sarah Miller	Portland Elementary	3

Foster Child? (yes/no)	Student Still Enrolled? (yes/no)	District's initial determination of eligibility status (free, reduced- price, paid, not recorded)
no	yes	free
no	yes	free
no	yes	reduced-priced
no	yes	reduced-priced
no	yes	paid
yes	yes	free

Household certified for free meals by application based on categorical eligibility (yes/no)	Household certified for school meal benefits based on household income reported on the application (yes/no)	Application selected for cause (yes/no)
no	yes	no
no	yes	no
no	yes	no
no	yes	no
no	yes	yes
yes	no	no

Result of verification process (no change, free to reduced-price, free to paid, reduced-price to free, reduced-price to paid, missing)	Reason for change in benefits (change in income eligibility, household income, change in SNAP/TANF/FDPIR participation, refusal to cooperate, no response, other (please specify), missing)
no change	NA
reduced-price	household income
free	change in income eligibility
free	change in income eligibility
no change	NA
reduced-price	change in SNAP/TANF/FDPIR participation

Application was directly verified (yes/no)	Parent/Guardian1 First Name
yes	Marie
no	Marie
no	Carol
no	Carol
no	Carol
no	David

Parent/Guardian1 Last Name	Parent/Guardian1 Street Address, Line 1	Parent/Guardian1 Street Address, Line 2	Parent/Guardian1 City of Residence
Jones	123 Red Street	Apt 1	New York
Jones	123 Red Street	Apt 1	New York
Brady	456 Green Road		St.Louis
Smith	456 Green Road		St.Louis
Smith	456 Green Road		St.Louis
Miller	789 Organe Blvd		Portland

Parent/Guardian1 State of Residence (2 letter code e.g. NJ, PA, TX, etc.)	Parent/Guardian1 Zip Code (5 digits)	Parent/Guardian1 Home Telephone Number (10 digits)	Parent/Guardian1 Cell Telephone Number (10 digits)
NY	12345	505-020-2999	489-292-2920
NY	12345	505-020-2999	489-292-2920
MO	12222	849-930-2020	
MO	12222	849-930-2020	
MO	12222	849-930-2020	
OR	34332	992-020-2002	872-280-2992

Parent/Guardian1 Work Telephone Number (10 digits + extension, if applicable)	Parent/Guardian1 Email Address	Parent/Guardian Language1 (English/Spanish/Other (please specify))
		English
		English
829-289-9821	csmith@gmail.com	Spanish
829-289-9821	csmith@gmail.com	Spanish
829-289-9821	csmith@gmail.com	Spanish
	dmiller@yahoo.com	Other (Chinese)

Parent/Guardian2 First Name	Parent/Guardian2 Last Name	Parent/Guardian2 Street Address, Line 1	Parent/Guardian2 Street Address, Line 2
Charles	Jones	123 Red Street	Apt 1
Charles	Jones	123 Red Street	Apt 1

Parent/Guardian2 City of Residence	Parent/Guardian2 State of Residence	Parent/Guardian2 Zip Code (5 digits)
NY	New York	12345
NY	New York	12345

Parent/Guardian2 Home Telephone Number (10 digits)	Parent/Guardian2 Cell Telephone Number (10 digits)	Parent/Guardian2 Work Telephone Number (10 digits + extension, if applicable)
505-020-2999	802-283-0298	
505-020-2999	802-283-0298	

Parent/Guardian2 Email Address	Parent/Guardian Language2 (English/Spanish/Other (please specify))
	English
	English