

SHARING INFORMATION WITH OTHER PROGRAMS

Dear Parent/Guardian:

With your permission, your child's status for receiving benefits under this program may be shared with the administrators of our school programs in order to ensure your child is properly supported in other school activities. This permission is especially helpful around field trips, clubs, sports, and special programs. If you agree to share your child's lunch status only (NO other financial information) with school administrators, please check here.

Sending in this form will not change whether your children receive free or reduced price meals.

If you checked the box above, giving us permission to share your child's lunch status with school administrators, please fill out the form below to ensure that your information is shared for the child(ren) listed below.

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 **Edward Gilbert, Food Services Director**, at **781-297-1051** or e-mail at **e_gilbert@stoughtonschools.org**.

Please return this form via email or on paper to: **Edward Gilbert, O'Donnell Middle School, 211 Cushing Street, Stoughton, MA. 02072** by **October 1, 2019**