

Direct Certification in the School Nutrition Programs

Presented by:
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Public Notification Requirements (ISBE Actions)

- Near the beginning of each school year, the public must be notified that the National School Lunch Program (NSLP), School Breakfast Program (SBP), and/or Special Milk Program (SMP) are available in the school or school district.
- This notice must include the Income Eligibility Guidelines (IEGs) for free and reduced-price meals and/or free milk.
- The public announcement must be provided to the local news media.
- The Illinois State Board of Education submits a statewide public announcement on behalf of all participating sponsors annually.
- Copies of the public announcement must be made available upon request to any interested person.
- A prototype is available online.

Public Notification Requirements (SFA Actions)

- Local Education Agencies (LEAs) must submit public announcements to local unemployment offices and major employers contemplating large layoffs in the attendance area of the school.
 - Maintain documentation locally for an administrative review
- When submitting a public announcement for print, LEAs should request the announcement be free of charge.

Carryover of Previous Year's Eligibility

- Schools are required to carry over eligibility from the previous year for 30 operating days into the subsequent school year or until a new determination has been made, whichever comes first.
- Although schools are **not** required to notify households that the carryover period has ended, we have a sample form (ISBE 68-11) and recommend that you do.
- Household is responsible for any meal charges incurred until new application is received and approved. Refer to your local school policy on charging meals.

NOTIFICATION THAT THE REQUIRED CARRYOVER PERIOD IS ENDING SOON

Dear Parent or Guardian:

Your eligibility status for free meals or milk or reduced-price meals is based on the prior school year's application for meal/milk benefits. Meal/milk benefits for the child(ren) listed below will end when the required carry over period ends on _____
(Specify date-must be 30 operating days from the start of your school year.)

Insert Names of Child(ren)

_____	_____
_____	_____
_____	_____

Please note that we are unable to provide further meal/milk benefits unless you complete a Household Eligibility Application with the required information for the current school year. Please complete and submit the enclosed Household Eligibility Application as soon as possible so your new eligibility may be determined.

You may reapply at any time during the school year if you believe a change in circumstances may make you eligible (such as a decrease in household income, an increase in household members, or a household wage earner becomes unemployed).

If you do not agree with the decision, or would like further clarification, please contact the school at the contact information below.

_____	_____
Name	Title
_____	_____
Address	Telephone Number (Include Area Code)

Full-Year Eligibility

- Once eligibility is determined, whether direct certification or via Household Eligibility Application (HEA), that eligibility remains in effect for the rest of that school year and for carryover into the subsequent school year.
- Households are **not** required to report changes in income, household size, receipt of benefits, or homeless/migrant status.
- Exceptions to full-year eligibility occur when:
 - The initial eligibility determination was incorrect, maybe due to a confirmation review or audit/review
 - Verification of household eligibility does not support the level of benefits for which the household was approved
 - Voluntary request by the household to withdraw the benefits (recommend request in writing)

Effective Date of Eligibility

- In WINS, click on *Sponsor Application & Participation*, then *Questionnaire*, then *Eligibility Determination*
- Determined at the LEA/Sponsor/SFA level for all sites

Program Year: 2027 Program: SNP

SNP Sponsor Questionnaire

Annual Training	Eligibility Determination 1. Each SFA now has a choice regarding the effective date of eligibility for both traditional household eligibility applications and direct certification. Please select one. ☐ Application Approval Date or Direct Certification Access Dates - A student's meal benefits are effective the date the Determining Official reviews and approves the household eligibility application. Benefits provided through direct certification are effective the access date of the file in WINS. ☐ Application Submission Date or Direct Certification Effective Date - A student's meal benefits are effective the date the SFA receives the household eligibility application from the household. If choosing this option, the SFA will need to have a method in which to indicate the "received Date". Benefits provided through direct certification are effective the first day of the month regardless of when the file is accessed. Refunds of meal payments may be required. ☒ Not Applicable - Eligibility Determinations are not made. (This may be due to Community Eligibility Provision (CEP) participation or Special Milk (paid option).)
Sponsor Information	
Official Designation	
School Nutrition Program Director	
Eligibility Determination	
Financial Management	
Policy Statement	
Permanent Agreement	
Summary	

Previous Next

How Are Meal Benefits Determined?

- **Direct Certification**
 - Certification of SNAP/TANF/income-eligible federal Medicaid(Free and Reduced Price)/Foster Child AND Homeless/Migrant/Head Start benefits via *Electronic Direct Certification System*
- or
- **Categorical Eligibility**
 - Homeless, migrant, runaway, foster child or Head Start listing
- or
- **Household Eligibility Application**
 - SNAP/TANF application
 - Income application
 - Foster child application

Overview of the Electronic Direct Certification System

- The *Electronic Direct Certification System* contains confidential student data.
- You must have a login name and password to *IWAS* to access *WINS*.
- Access is ONLY provided to schools/districts participating in the National School Lunch/School Breakfast Program.
- The *Electronic Direct Certification System* is available from the main dashboard in *WINS*.
- All federal rules and regulations regarding the use of this data including confidentiality and disclosure must be followed.

WINS Dashboard



WINS
Web-based Illinois Nutrition System

Sponsor Lookup

Name / RCDT / City / Address / Zip
51084186025

Program
School Nutrition Programs

Program Year
2026

Search

✖ Your application is not complete.

Alerts

No Sponsor alerts. Please use the Show Existing Site Alerts link below.

Show existing site alerts

Comments/Notes

Canceled - unable to conduct in thi...
WINS not used in this program year
WINS not used in this program year

Show existing site notes

Sponsor Tasks

Sponsor Applications & Participation

Site Applications

Claims & Monitoring

Sponsor Info

Administrative Tasks

Sponsor Tasks

Batch Daily Meal Counts

Batch Participation Detail

Batch Site Questionnaire

Batch Site Participation

Is Community Eligibility Provision (CEP) for you?

CEP Group Information

Add New Site

Deactivate/Re-activate Site(s)

Deactivate Sponsor

Review Citation Responses

Waivers

Reports

Applications Not Received

Direct Certification

Deleted Sites

Claim Data Report

Summary Reports - Applications Submitted for Sponsor

Summary Reports - Applications Submitted for Sites

Summary Reports - List of Sites and Applications Submitted

Site Application Tasks

Enroll Site In New Program

Edit Site Questionnaire

Edit Program Participation

Edit Participation Detail

Budget

No WINS Budgets required.

Have questions or need help? Contact our Call Center (217)558-3600 between 8:00am - 5:00pm CST, Monday - Friday or Click here to Contact Us
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Direct Certification in Illinois

Direct Certification is conducted through a partnership between the ISBE and the following:

- Illinois Department of Human Services (IDHS) for **SNAP and TANF records**
- Illinois Department of Healthcare and Family Services (HFS) for **income-eligible federal Medicaid records**
- Illinois Department of Children and Family Services (DCFS) for **foster children records**



What is Direct Certification?

- Direct Certification is the process when LEAs certify children who are members of households receiving assistance under the SNAP, TANF, income-eligible federal Medicaid or foster children as eligible for free or reduced-price school meals/milk based on agency records. Added Homeless, Migrant, and Head Start reports via SIS for public schools only.
- Households in which students are directly certified are **not** required to complete the Household Eligibility Application to receive free or reduced-price meal/milk benefits.
- Students directly certified for free or reduced-price school meal/milk benefits are eligible for the entire school year and are not subject to verification requirements.

What is Extension of Benefits?

- Via extension of meal benefits, if any member of the household is eligible for SNAP/TANF/income-eligible federal Medicaid (free and reduced-price) benefits, all students in that household are eligible for free or reduced-price meal/milk benefits.
 - Extension of benefits is **not** allowed for Foster Child, Homeless, Migrant or Head Start status.
 - Prior to completing the extension of benefits required paperwork, please search using the case number in the Direct Certification System. This often will find all household children and minimize extension of benefit paperwork. Please keep the single child direct certification report for your documentation.

Frequency of Direct Certification

- Direct Certification is a requirement for LEAs participating in NSLP and must be conducted at least three times annually per USDA as follows:
 1. at or around the beginning of the school year
 2. three months after the initial effort
 3. six months after the initial effort
- ISBE recommends that all sponsors (public and nonpublic) access the *Electronic Direct Certification System* monthly to maximize direct certification and lessen administrative paperwork.

Eligibility Process (Step 1-3 of 6)

- Step 1
 - Begin in early July each year
 - Maximize Direct Certification
 - Access and process the July Annual File or complete upload of enrollment file
 - Could also include August File, depending on start date of school and preference
 - Extend benefits if SNAP, TANF or income-eligible federal Medicaid (free and reduced-price eligible)
- Step 2
 - Notify households directly certified for free or reduced-price meals benefits
- Step 3
 - Distribute an HEA (Letter to Household, Application, and Instructions) to all households not directly certified for meal benefits. If DC reduced, HEA is also required.

Eligibility Process (Step 4-6)

- Step 4
 - Process HEA according to USDA requirements within 10 days of receipt, providing meal benefits in accordance with your district's effective date of eligibility
 - Continue to document directly certified students, if possible
- Step 5
 - Notify all households that submitted HEA if approved or denied
- Step 6
 - Throughout the school year, access direct certification reports and process all submitted HEAs

Direct Certification with Federal Medicaid – Free and Reduced-Price Eligibility

- Direct Certification matches include students eligible for both **free** and **reduced-price** meal benefits based on their participation in federal Medicaid at the appropriate income levels.
- **Reduced-price** matches will be on a separate downloadable export and print report via the Electronic Direct Certification system in WINS for NSLP/SBP schools.
 - Notification of Reduced-Price Medicaid match requires the notification letter as well as a HEA
- Not all households that receive federal Medicaid benefits in Illinois will qualify for USDA meal benefits.
 - Illinois threshold for federal Medicaid for children exceeds the 185% Income Eligibility Guidelines (IEGs) for reduced-price meal benefits

Using Medicaid in Direct Certification

- This is **only** available to NSLP/SBP participating sponsors.
- The addition of DC federal Medicaid reduced-price eligible students is to reduce administrative paperwork for eligible households and school staff.
- A Medicaid case number **cannot** be entered on an HEA and approved for meal benefits.
- Federal Medicaid is **only** used for USDA meal benefit approval **if** found in the ISBE Direct Certification System.

Electronic Direct Certification Home



Home

Direct Certification

- SNAP/TANF/Free Medicaid
- Reduced Medicaid
- Homeless/Migrant/Headstart
- File Upload Match
- Single Child Match

Direct Verification

Contact Us

Change RCDT

Illinois State Board of Education

User Id: rramage RCDT: 51-084-1860-25 - Springfield Sch Dist 186

Welcome to the Illinois State Board of Education's Electronic Direct Certification System.

This system is used to certify a child to receive meal benefits for the USDA Child Nutrition Programs, based on information exchanged between other assistance programs without a household eligibility application completed by the household. LEAs participating in the National School Lunch Program are required to directly certify children for free meal benefits found in this system. If a child is directly certified for meal benefits, verification is not required. The local educational agency (LEA) agrees to follow all rules and regulations regarding the use of this data including confidentiality and disclosure as detailed in the School-Based Child Nutrition Programs Permanent Agreement.

Data sources currently being used for direct certification in Illinois includes:

- Supplemental Nutrition Assistance Program (SNAP),
- Temporary Assistance for Needy Families (TANF),
- Foster status,
- Income-Eligible Medicaid,
- Homeless,
- Migrant, and
- Head Start.

Please refer to the Electronic Direct Certification section of the [Administrative Handbook](#) for complete

Direct Certification Home | ISBE HOME | LOGOUT

SESSION TIMEOUT 18:11

Have questions or need help? Contact our Call Center (217)558-3600 between 7:00am - 5:00pm CST, Monday - Friday or Click here to Contact Us
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Electronic Direct Certification

- Annual/Monthly Match
 - Public School Districts **only**
- Sponsor File Upload Match
 - **All** LEAs
- Single Child Lookup
 - **All** LEAs

Annual Match File (Public School Districts Only)

- File available July 1 annually
- **File Type:** *Annual*
- The *Annual* file will identify the students who were enrolled in SIS (June Records) for your district that are receiving SNAP/TANF/Foster or Income-Eligible Federal Medicaid benefits.
- Each public school district will have **one** *Annual* File each school year.

Monthly Match File (Public School Districts Only)

- **File Type:** *Monthly*
- The *Monthly* file will identify any new students who:
 - are enrolled in SIS (Current Month Records)
 - did **not** appear on the *Annual* file for your district
 - are receiving SNAP/TANF/income-eligible federal Medicaid/Foster child benefits
- *Monthly* files will identify the number of matches. In some cases, this will be zero.
- Students on this report/file, currently enrolled in your district, are automatically eligible for free or reduced-price meals/milk, **regardless of the case ID number and the address listed on the file.**
- It is unlikely that **all** students on the file will be directly certified. For example, some students may **not** re-enroll in your district or may transfer schools. Some matches are close matches and may not be an enrolled student.
- Public schools should access the *Monthly* file as close to the 1st of the month as possible.


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SNAP/TANF/Free Medicaid Monthly/Annual Match Files

File Type	Approximate Number of Records	Match Date	Access Date	Download	Print
Monthly	56	06/01/2026			
Monthly	73	05/01/2026	05/01/2026		
Sponsor File	62	04/16/2026	04/23/2026		
Sponsor File	6,535	04/16/2026	04/22/2026		
Sponsor File	6,535	04/16/2026	04/16/2026		
Sponsor File	6,126	04/15/2026	04/15/2026		
Sponsor File	6,126	04/14/2026	04/14/2026		
Monthly	67	04/01/2026	04/06/2026		
Monthly	61	03/01/2026	03/18/2026		
Monthly	71	02/01/2026	03/18/2026		
Monthly	71	01/01/2026	03/18/2026		
Monthly	67	12/01/2025	12/01/2025		
Monthly	230	11/01/2025	12/01/2025		
Monthly	482	10/01/2025	10/01/2025		
Monthly	75	09/01/2025	09/02/2025		
Monthly	93	08/01/2025	08/04/2025		
Annual	7,262	07/01/2025	07/24/2025		

Electronic Direct Certification FREE Match Page

Electronic Direct Certification REDUCED Match Page

Reduced Medicaid Monthly/Annual Match Files



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File Type	Approximate Number of Records	Match Date	Access Date	Download	Print
Monthly	No matches found	06/01/2026		N/A	N/A
Monthly	8	05/01/2026	05/01/2026		
Monthly	1	04/01/2026	04/07/2026		
Sponsor File	10	03/11/2026	03/11/2026		
Sponsor File	126	03/04/2026	03/04/2026		
Monthly	No matches found	03/01/2026		N/A	N/A
Monthly	2	02/01/2026	02/02/2026		
Sponsor File	133	01/06/2026	01/06/2026		
Monthly	3	01/01/2026	01/05/2026		
Monthly	2	12/01/2025	12/01/2025		
Monthly	2	11/01/2025	11/04/2025		
Sponsor File	120	10/01/2025	10/01/2025		
Monthly	18	10/01/2025	10/01/2025		
Sponsor File	3	09/02/2025	09/02/2025		
Monthly	2	09/01/2025	09/02/2025		
Sponsor File	107	08/10/2025	08/10/2025		
Monthly	No matches found	08/01/2025		N/A	N/A
Sponsor File	108	07/01/2025	07/01/2025		
Annual	86	07/01/2025	07/01/2025		

Homeless, Migrant, Head Start

- Only available September 1 – June 30
- This is **only** used to provide students in these categories who have **not** already been matched via SNAP, TANF, income-eligible federal Medicaid or Foster Student Status.
- This report can change nightly based on SIS data submitted to ISBE.

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User Id: rramage RCDT: 51-084-1860-25 - Springfield Sch Dist 186

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Download File

As this feature utilizes data found in the Student Information System, this function is only available for PUBLIC SCHOOLS.

Each public school district LEA may access a current direct certification report for students categorized as homeless, migrant or Head Start within the Student Information System. This report must be printed and maintained as documentation of such statuses. Students found in this manner are directly certified for free meal benefits. There is no extension of benefits for Homeless, Migrant or Head Start eligibility status.

Homeless Migrant HeadStart

File Type	Approximate Number of Records	Description	Download	Print
HMHS	34	Homeless, Migrant, Headstart Students		

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Annual/Monthly Match (Public School Districts ONLY)

- Select **Print** – an Annual/Monthly Match Report is displayed
- This report **must** be printed and maintained to document eligibility status. Document may be saved electronically.
- The eligibility of a student begins either the first day of the match month or the access date, depending on the district's selections for HEA effective dates. (See slide 6)
- File also available for download. See Admin Handbook for detailed instructions if needed for Point of Service Systems.

Sponsor Match (All LEAs)

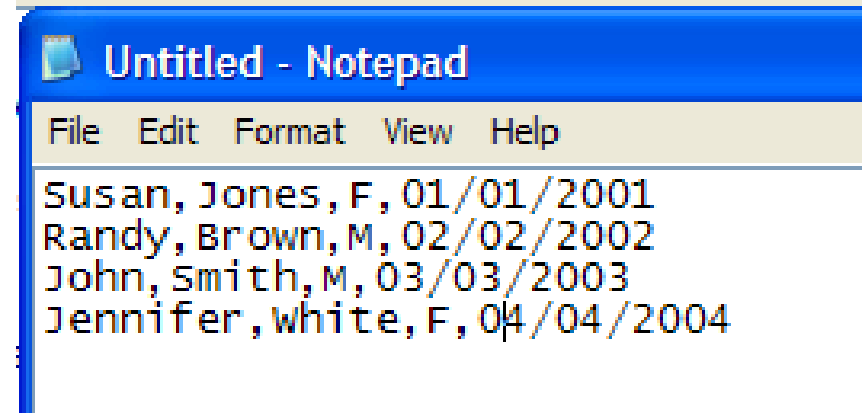
- Any LEA may upload a comma-delimited file at any time.
- Each file must contain the following fields:
 - First Name
 - Last Name
 - Gender at birth (F-Female, M-Male)
 - Birth date (month/day/year; e.g., 01/17/2010)
- An optional 5th and 6th column of data may be added.
 - Such fields will be returned unchanged in the sponsor match file.
 - May be helpful to include SIS ID number, name of school, etc., for ease of matching to overall student file.
- Results will be displayed as File Type: *Sponsor File*

Sponsor Match File Results

- Results will identify the students included on the upload file who are receiving SNAP/TANF/income-eligible federal Medicaid/Foster Child benefits.
- Two separate reports may be generated:
 - Free
 - Reduced Price
- Students on this report/file **may** be directly certified for free or reduced-price meals/milk if the LEA determines that the students are enrolled in the school/school district.

What is a Comma-Delimited File ?

- A file format that is used for uploading data to the *Electronic Direct Certification System*
- A comma-delimited file uses a comma to separate values.
 - Example:
Susan,Jones,F,01/01/2012
- More detailed information about comma-delimited files and how to create one in both Notepad and Microsoft Excel are included in the *Guidance Document*.



Duplicate Matches for Same Student

- In some instances, a student might be found in one program file one month, and another program file another month. This is a duplicate student match.
- If this occurs, please use the following as the hierarchy of direct certification status:
 1. SNAP*
 2. TANF*
 3. Foster
 4. Income-Eligible federal Medicaid FREE*
 5. Income-Eligible federal Medicaid REDUCED-PRICE*

* Status may be extended to all household students.

Single Child Lookup (ALL LEAs)

- LEAs may search for a single student who may be receiving SNAP/TANF/income-eligible federal Medicaid/Foster Child benefits.
- An LEA may search first name, last name, and city.
- A *Single Child Lookup Report* is available.
 - There is no limit to the number of Single Child Reports that may be created.
- The option to download a file is **not** available for a Single Child Lookup.

Single Child Match

Address Search



User Id: rramage RCDT:

Single Child Match

An LEA may look up a single student with the following search criteria:

1. first name, last name, and city.

When you look up a single child by Name and Address, the first and last name are required fields. The city is an optional field.

Lists with child(ren) that match exactly or that are close will appear. Each LEA must select the child(ren) that is (are) enrolled in their school by selecting Add to Report. When the LEA completes their search, select Edit Report to review the children names or Print Report to print the report for your records.

Search Criteria

First Name *

Last Name *

City

* required field

Search

Single Child Match Results

Type of Search

☒ Name and Address ☐ Case Number

Search Criteria

First Name *
Last Name *
City

* required field

Search

Exact Matches

Name	Address	Birth Date	Sex	Case Number/Identifier	Assistance Source		
					Free Medicaid	Add To Report	EXACT
					SNAP	Add To Report	EXACT
					SNAP	Add To Report	EXACT
					Reduced Medicaid	Add To Report	EXACT
Total Exact Matches: 4							

Exact Match and Close Match

- **Exact Match** – All fields match
- **Close Match** – One or more fields may be close matches or could “sound like” the requested search
- With **all** matches, the LEA determines if the match is the student enrolled in their school.
- If the LEA determines that the match is an enrolled student, free or reduced-price meal/milk benefits **must** be provided.
- If the LEA determines that the match is **not** an enrolled student, please indicate on the documentation. No further action is needed by the LEA. The household is **always** offered the HEA to submit for meal benefits.

USDA Policy – Extending SNAP/TANF/Income-Eligible Federal Medicaid Eligibility for Free or Reduced-Price Meal Benefits

- Extending eligibility means that **all** children or adults in the household who are participating in a Child Nutrition Program are categorically eligible for free or reduced-price meal/milk benefits if any household member (child or adult) is receiving SNAP/TANF/income-eligible federal Medicaid benefits.
 - **NOTE:** The *Electronic Direct Certification System* contains only children 23 and younger.
 - **NOTE:** Foster Child, Homeless, Migrant, and Head Start status is **not** extended to other students within the same household.

Required Notification to Households – FREE Eligibility

- The LEA must notify the household of the following:
 - The student(s) is eligible for free meal/milk benefits;
 - If students residing in the same household are **not** included on the notice, they should contact the school to request an extension of free or reduced-price meal benefits to all students;
 - No further action is required. The household **does not** have to complete a Household Eligibility Application; and
 - If the household does not want free or reduced-price benefits for a directly certified student, how to notify the LEA.

Use your "Mouse" or "Tab" key to move through the fields and check boxes. After completing last field, save document to hard drive to make future updates or click Print button.

SAMPLE NOTIFICATION LETTER - DIRECT CERTIFICATION

Date: _____

Dear Parent/Guardian:

Each student identified below is automatically approved for free school meals for the current school year based on your eligibility for Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance to Needy Families (TANF), Income Eligible Medicaid or Foster Child status.

Name of Student	Grade	Assistance Source	School Name

Please **do not** fill out a Household Eligibility Application for free or reduced price meals for the students listed above. This student(s) will receive free meals unless you notify us that you do not want to receive these benefits. **If you do not want your child to receive free meal benefits** please completely fill out the information in the box below and return to the school office no later than _____. (Insert Date)

If you have student(s) in your household who are not listed above, please contact this office at the telephone number provided below at your earliest convenience. A Household Eligibility Application is NOT needed; free meal benefits will be extended to all children residing in the same household except foster child status is for the foster child only.

☐ I DO NOT want my child(ren), as listed above, to receive free meal benefits.	
Date _____	Signature of Parent or Guardian _____

If any of the information listed above is incorrect, or you have any questions, please contact this office at (____) _____.

_____ Name	_____ Title
---------------	----------------

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCRPS-20P-ComplaintForm-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. **mail:**
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or
2. **fax:**
(833) 256-1665 or (202) 690-7442; or
3. **email:**
program.intake@usda.gov

This institution is an equal opportunity provider.

ISBE 69-15 (6/22)

[Print](#) [Reset Form](#)

ISBE Form 69-15

Sample Notification Letter: Direct Certification Medicaid Reduced-Price Eligible

- [ISBE Form 68-48](#)
- Form posted in English and Spanish
- HEA must be provided with this notice

Use your "Mouse" or "Tab" key to move through the fields and check boxes. After completing last field, save document to hard drive to make future updates or click Print button.

 **Illinois State Board of Education**
100 North First Street
Springfield, Illinois 62777-0001

**SAMPLE NOTIFICATION LETTER -
DIRECT CERTIFICATION MEDICAID
REDUCED PRICE ELIGIBLE**

NUTRITION DEPARTMENT

Date: _____

Dear Parent/Guardian:

Each student identified below is automatically approved for REDUCED-PRICE school meals for the current school year based on your eligibility for Income Eligible Medicaid.

Name of Student	Grade	Assistance Source	School Name

No further action is needed to receive reduced-price eligible meals at school for the enrolled students. If however, your household may qualify for free meals based on household size and income, please complete the Household Eligibility Application for free or reduced price meals enclosed. Once submitted, you will receive additional notification if the student(s) qualifies for greater benefits. If you do not want your child to receive reduced-price meal benefits please completely fill out the information in the box below and return to the school office no later than: _____ (Insert Date)

If you have student(s) in your household who are not listed above, please contact this office at the telephone number provided below at your earliest convenience. A Household Eligibility Application is NOT needed; reduced-price meal benefits will be extended to all children residing in the same household.

☐ I DO NOT want my child(ren), as listed above, to receive reduced-price meal benefits.

Date: _____ Signature of Parent or Guardian: _____

If any of the information listed above is incorrect, or you have any questions, please contact this office at (_____) _____.

Name: _____ Title: _____

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 725-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20Form-0008-0002-508-11-28-17Fav2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail:
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or
2. fax:
(833) 256-1665 or (202) 696-7442; or
3. email:
program.intake@usda.gov

This institution is an equal opportunity provider.

Print **Reset Form**

ISBE 68-48 (8/22)

Maximizing the Direct Certification Numbers

- Access the system **monthly** or more frequently.
- If an HEA with a SNAP/TANF number or a foster child application is submitted, the LEA should check the *Electronic Direct Certification System* for the student.
 - If found, direct certify the student (and any additional household members for SNAP/TANF/income-eligible federal Medicaid)
 - If not found, however, process the HEA at face value. Then begin the verification for cause process.

Note: HEAs with Medicaid Case ID Numbers **cannot** be accepted under any circumstances.

How Are Meal Benefits Determined?

- **Direct Certification**
 - Certification of SNAP/TANF/income-eligible federal Medicaid(Free and Reduced Price)/Foster Child AND Homeless/Migrant/Head Start benefits via *Electronic Direct Certification System*
- or
- **Categorical Eligibility**
 - Homeless, migrant, runaway, foster child or Head Start listing
- or
- **Household Eligibility Application**
 - SNAP/TANF application
 - Income application
 - Foster child application

Categorical Eligibility — Head Start, Foster Child, Homeless, Migrant, and Runaway Children

- Dated list with each child's name and signed by appropriate person
 - Head Start director
 - Foster care agency director
 - Homeless education liaison
 - Shelter director
 - Migrant education coordinator
 - Runaway and homeless youth service provider
- or
- Application with child's name and signature of appropriate person

Household Eligibility Documents

- Documents for SY 2026-27 will be available in late June 2026.
 - Household Eligibility Application Prototype
 - Sample Public Announcement
 - Direct Certification Sample Notification
 - Extension of Benefits Form
- Watch for ISBE announcement
- FY 2027 Income Eligibility Guidelines are currently available.

Nutrition Department

Illinois State Board of Education

Telephone: 800-545-7892 (in Illinois only)
217-782-2491
Fax: 217-524-6124
Email: cnp@isbe.net
Website: www.isbe.net/nutrition



Resources:

- [USDA Eligibility Manual for School Meals](#)
- [ISBE Administrative Handbook, Electronic Direct Certification](#)

Thank you