



Dear Parent or Guardian,

Congratulations! You have chosen a childcare provider that participates in the Child and Adult Care Food Program (CACFP). Participating in the CACFP means that the provider cares about good nutrition for children, will introduce and serve a variety of nutritious foods for your child to eat, and will serve foods appropriate for your child’s nutritional needs. The provider you have chosen cannot charge a separate fee for meals, nor ask you to provide food for your child for meals claimed for reimbursement from the CACFP, except in some special cases. Depending upon the hours in care, your provider will be serving your child breakfast, morning snack, lunch, afternoon snack, supper and/or late snack.

Please complete, sign and return this **Income Eligibility Form (IEF)** to the center as soon as possible. This information is required for the center to receive CACFP reimbursement for the meals served to your child. The Colorado Department of Public Health and Environment assures that **this form is confidential** and the information you provide will not be used elsewhere.

If no person in your household receives benefits from Temporary Assistance For Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), also known as Food Stamps, or the Food Distribution Program on Indian Reservations (FDPIR), or is not the beneficiary of the Other Source Categorical Eligibility programs, please list your household’s total gross income from the current month, the amount projected for the first month the application is made for, or the month prior to the application. The U.S. Department of Agriculture, which funds the CACFP, defines a household as a group of related or unrelated individuals who are living as one economic unit and who share housing and all significant income and expenses.

If no person in your household receives benefits from Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), or the Food Distribution Program on Indian Reservations (FDPIR), you must provide the last four digits of your Social Security Number according to regulations. The disclosure of the Social Security Number is voluntary; however, the last four digits of the Social Security Number, or an indication of “none,” is required for the approval of this form.

If any of the children living in the household are beneficiaries of the Other Source Categorically Eligible programs (Foster, Head Start/Early Head Start or Even Start Program, Homeless, Migrant or Runaway), the children are eligible for free meals and there is no need to complete an application - just mark the box next to the program that applies. The institution collecting the form will need to verify the child’s participation in the program by requesting documentation from the placement office if the child is a foster child, from the Even Start or Head Start official if the child or the pregnant mother is enrolled Head Start or Early Head Start or the child is an Event Start participant, and from the Migrant, Homeless or Runaway program officials, if the child is a migrant, homeless or runaway child. For Even Start, documentation from the Even Start official confirming that the child has not yet entered Kindergarten.

If any person in your household receives benefits from the Temporary Assistance For Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), or the Food Distribution Program on Indian Reservations (FDPIR), income reporting and the disclosure of the last four digits of the Social Security Number (SSN) in Step 3 is not required.

Household Income Chart

If your household's income is less than or the same as the amounts indicated for your household's size on the chart below, the center will receive more meal reimbursement from the Child and Adult Care Food Program (CACFP) to help provide the best meals possible for the children in care.

Household Size	1	2	3	4	5	6	7	8	For each additional person add:
Yearly	22,459	30,451	38,443	46,435	54,427	62,419	70,411	78,403	+ 7,992
Monthly	1,872	2,538	3,204	3,870	4,536	5,202	5,868	6,534	+ 666
Weekly	432	586	740	893	1,047	1,201	1,355	1,508	+154

This chart is not to be used for determining eligibility by center staff, but is a guide for families completing the form.



Child Meal Patterns
Child & Adult Care Food Program



Breakfast (Select all three components for a reimbursable meal)				
Food Components and Food Items	Ages 1-2	Ages 3-5	Ages 6-12	Ages 13-18 (At-risk afterschool programs and emergency shelters)
Fluid Milk	4 ounces	6 ounces	8 ounces	8 ounces
Vegetables, fruits, or portions of both	¼ cup	¼ cup	¼ cup	¼ cup
Grains*				
Whole grain-rich or enriched bread	½ slice	½ slice	1 slice	1 slice
Whole grain-rich or enriched bread product, such as biscuit, roll or muffin	½ serving	½ serving	1 serving	1 serving
Whole grain-rich, enriched or fortified cooked breakfast cereal, cereal grain and/or pasta	¼ cup	¼ cup	¼ cup	¼ cup
Whole grain-rich, enriched or fortified ready-to-eat breakfast cereal (dry, cold)				
Flakes or rounds	½ cup	½ cup	1 cup	1 cup
Puffed cereal	¾ cup	¾ cup	1 ¼ cup	1 ¼ cup
Granola	½ cup	½ cup	¼ cup	¼ cup
Grains substituted with a meat/meat alternate* (May be used to meet the entire grain requirement a maximum of three times per week.	½ ounce	½ ounce	1 ounce	1 ounce
Lunch and Supper (Select all five components for a reimbursable meal)				
Food Components and Food Items	Ages 1-2	Ages 3-5	Ages 6-12	Ages 13-18
Fluid Milk	4 ounces	6 ounces	8 ounces	8 ounces
Meat/meat alternates				
Lean meat, poultry, or fish	1 ounce	1 ½ ounce	2 ounces	2 ounces
Tofu, soy product, or alternate protein products	1 ounce	1 ½ ounce	2 ounces	2 ounces
Cheese	1 ounce	1 ½ ounce	2 ounces	2 ounces
Large egg	½	¾	1	1
Cooked dry beans or peas	¼ cup	¾ cup	¼ cup	¼ cup
Peanut/soy/nut or seed butters	2 TBSP	3 TBSP	4TBSP	4 TBSP
Yogurt, plain or flavored unsweetened or sweetened	4 ounces/ ½ cup	6 ounces/ ¾ cup	8 ounces/ 1 cup	8 ounces/ 1 cup

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