

**GUIDELINES TO DETERMINE PARTICIPANT ELIGIBILITY
FOR FREE AND REDUCED PRICE MEALS
School Year 2015-2016**

ANNUAL FAMILY INCOME BEFORE DEDUCTIONS

ELIGIBLE FOR FREE MEALS OR FREE MILK				ELIGIBLE FOR REDUCED PRICE MEALS		
FAMILY SIZE	YEARLY	MONTHLY	WEEKLY	YEARLY	MONTHLY	WEEKLY
ONE	\$15,301	\$1,276	\$295	\$21,775	\$1,815	\$419
TWO	20,709	1,726	399	29,471	2,456	567
THREE	26,117	2,177	503	37,167	3,098	715
FOUR	31,525	2,628	607	44,863	3,739	863
FIVE	36,933	3,078	711	52,559	4,380	1,011
SIX	42,341	3,529	815	60,255	5,022	1,159
SEVEN	47,749	3,980	919	67,951	5,663	1,307
EIGHT	53,157	4,430	1,023	75,647	6,304	1,455
FOR EACH ADDITIONAL FAMILY MEMBER, ADD						
	5,408	451	104	7,696	642	148

CONVERSION FACTOR

Annual Income Conversion: Weekly X 52, Every 2 Weeks X 26, Twice A Month X 24, Monthly X 12