*🡪 INSERT DISTRICT LETTERHEAD 🡨*

Letter to Notify Household of Incomplete Application

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|  |

Dear Parent or Guardian: Date:

Your application for free and reduced price meals or free milk cannot be approved because the application submitted is incomplete. The missing or incorrect information is indicated below:

NJ SNAP (Food Stamp) Number OR TANF Case Number (Step 2)

Child income frequency not indicated (Step 3)

Indicate income using acceptable frequencies (Step 3)

Frequency of income received by each household member (Step 3)

Gross income (net income is not acceptable) (Step 3)

Last four digits of Social Security Number for adult signing the application or if the adult does not have a Social Security Number, check the appropriate box (Step 3)

Adult Signature (Step 4)

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The above information must be provided by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Failure to provide this Information

*(date)*

will result in the application being denied. If you have any questions you may call \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

*(Person) (Phone Number)*

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Determining Official)*

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/ad-3027.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](http://mailto:program.intake@usda.gov/)

This institution is an equal opportunity provider.