Minnesota Department of Education

Summer Food Service Program
Public Housing Authority Documentation of Eligibility

Facility: _____

Address: _____

City: _____ Zip Code: _____

Contact Person: _____ Phone: _____

SFSP Sponsor _____ SFSP Site: _____

Each year sponsors of the Summer Food Service Program (SFSP) must qualify a serving site to determine if it is eligible to serve summer meals.

The eligibility for a Housing Authority facility is determined by comparing the incomes of the families residing in the complex to the current year's Household Income Guidelines for reduced-price meals.

Complete one of the following options below:

Option A *- If the housing complex requirements are less than the SFSP income guidelines (see page 2):*

Certification: We certify that the households in this housing complex have incomes less than the maximum for reduced-priced meals for their household size (see guidelines, page 2).

_____ _____

Signature of person making income determinations or certifications Date

Option B *- If the housing complex has mixed income levels, complete the following:*

The number of children in the housing complex eligible for free and reduced-price meals (see guidelines, page 2) _____

Total number of all the children living in the housing complex _____

Percent eligible (# of eligible ÷ total # of children = % eligible) _____ % _____

_____ _____

Signature of person making income determinations or certifications Date

Return this form to the SFSP sponsor, who will advise you of the site's eligibility. The income eligibility guidelines that qualify households for free and reduced-price meals are listed on page 2.

Summer Food Service Program

Household Income Guidelines- Maximum for Reduced-Price Meals

Total Household Income – Maximum
SFSP Guidelines Effective July 1, 2013 – June 30, 2014

Household Size	$ Per Year	$ Per Month	$ Twice Per Month	$ Per Two Weeks	$ Per Week
1	21,257	1,772	886	818	409
2	28,694	2,392	1,196	1,104	552
3	36,131	3,011	1,506	1,390	695
4	43,568	3,631	1,816	1,676	838
5	51,005	4,251	2,126	1,962	981
6	58,442	4,871	2,436	2,248	1,124
7	65,879	5,490	2,745	2,534	1,267
8	73,316	6,110	3,055	2,820	1,410
For each additional household member add:	7,437	620	310	287	144

If you have any questions, contact Food and Nutrition Service at: 651-582-8526, 1-800-366-8922 (Minnesota toll-free) or mde.fns@state.mn.us.