North Carolina Department of Health and Human Services Division of Public Health Women's & Children's Health Section Nutrition Services Branch Special Nutrition Programs

CHILD AND ADULT CARE FOOD PROGRAM MEDIA RELEASE

Agreement Number 7209

The Salisbury Rowan Community Action Agency, Inc. announces their participation in the U.S. Department of Agriculture funded Child and Adult Care Food Program. Meals will be available at no separate charge to enrolled children of the Head Start/Early Head Start program. The income guidelines for free and reduced price meals by family size are listed below. Children who are TANF recipients or who are members of SNAP or FDPIR households or are Head Start participants, are automatically eligible to receive free meal benefits.

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Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact the USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the <u>USDA Program Discrimination Complaint form</u>, (AD-3027) found online at http://www.ascr.usda.gov/complaint filing cust.html, and at any USDA Office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed form or letter by mail to U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410, by fax (202)690-7442 or e-mail at program.intake@usda.gov. This institution is an equal opportunity provider.

INCOME ELIGIBLITY GUIDELINES Effective JULY 1 2018 – JUNE 30 2019

The following Household Size and Income Standards are used to Determine Eligibility

HOUSEHOLD SIZE	YEARLY		MONTHLY		TWICE PER MO.		EVERY TWO WKS.		WEEKLY	
	Free	Reduced	Free	Reduced	Free	Reduced	Free	Reduced	Free	Reduced
1	15,782	22,459	1316	1872	658	936	607	864	304	432
2	21,398	30,451	1784	2538	892	1269	823	1172	412	586
3	27,014	38,443	2252	3204	1126	1602	1039	1479	520	740
4	32,630	46,435	2720	3870	1360	1935	1255	1786	628	893
5	38,246	54,427	3188	4536	1594	2268	1471	2094	736	1047
6	43,862	62,419	3656	5202	1828	2601	1687	2401	844	1201
7	49,478	70,411	4124	5868	2062	2934	1903	2709	952	1355
8	55,094	78,403	4592	6534	2296	3267	2119	3016	1060	1508
For each additional family member add	5616	7992	468	666	234	333	216	308	108	154

Contact person

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