QuikApps Parent Experience

Electronic Free or Reduced Meal Application Tracking

To create a parent or emancipated student user account for access to QuikApps, click the "Register" link on the site's webpage. The "Forgot Password" link allows the user to reset their password.

	ISA
PaySch	ools
	Login
	PaySch Adn

New User Registration

Clicking the "Register" link brings up a screen that allows the user to select whether they are a Student or a Parent. A student user account should only be created by an emancipated child.

2	Anywhere US	A
Select the	Pay School Admi type of user you would like to	in
I am a:	Select-	
	-Select-	
	Student	Next
Back to Sig	Parent	

The next screen is where the user will enter their First Name, Last Name, Email ID, password, and create a Security Question to verify the user's identity when a password reset is requested. Note that the password must conform to the security requirements specified.

•

Anywhere USA					
F	Pay Schools Admin				
Your First Name:	Mom				
Your Last Name:	Test				
Email Id:	Testing@mom.com				
Password:	•••••				
Confirm Password:					
Security Question:	dog name				
Security Answer:	•••				
Confirm Answer:	•••				
Previous	Password must contain a number, a lowercase letter,an uppercase letter,and be between 8 and 20 characters long. Finish				

When complete, click "Finish" to be redirected back to the site's login screen.

Anywhere USA	
PaySchools Admin	
Testing@mom.com	
password	Login
Register Forgot Password Help	

Related Students

The Portal home page lists all students related to the parent in PaySchools Admin. To add additional family members, click "Add Student" to search for other family members that are students. If the user is registered as a student, the option to add additional members is not available.

Home Help 4 Logo	ut						
		Welcom	ne to the Parent and Student	Portal			
			Related Students				
Student Id	Last Name	First Name	Middle Name	Grade	Birth Date	School	
Add Student	Please be	sure to add all your cu	rrent students using the Add Stu	dent button prie	or to continuing.		
	Discl	losure Category	Contact Information	Free\Reduced	d Meal Application		

In the pop-up screen, enter the student's Student ID, first name, and last name as your students were enrolled with the district.

📑 Add Student	XX
Student Information In order to add a student you will n as it is stored in your district's Stud	eed to know the first and last name and student id exactly dent Information System.
Student Id:	
Student First Name:	
Student Last Name:	
Co	ontinue Cancel

The newly added student will now appear in the grid. Repeat the Add Student Process until all students are listed on the screen. Click on "Contact Information" to verify/update information.

				Related Students			
Student Id	Last Name	First Name	Middle Name	Grade	Birth Date	School	
401109	Brown	Bradley		1		Anywhere USA Elementary	×
401576	Brown	Jada	Helene	6		Anywhere USA MS	×
289630	Brown	Lisa	Breann	12		Anywhere USA HS	×
Add Student		Please be sure to ac	dd all your current s	tudents using the A	Add Student butt	on prior to continuing.	
			gory	Contact Information		educed Meal Application	

Contact Information

The user is required to enter or update contact information prior to completing an application. The address information is required. Email is pre-populated based on the Email Id of the portal account. The phone number is optional.

Contact Information	X
Enter / Confirm Contact Information	
Please enter your contact information and preferred delivery method.	
Preferred Delivery Method: Mail Address:	
City / State / Zip:	
Email Address: test@mom.com	
Phone Number:	
Save Cancel	

Entering a New Application

When the Contact Information has been saved, the user can now click on the "Free/Reduced Meal Application" button to enter a new application or edit an existing application. The user will be prompted to verify/update their Contact Information if not previously updated. In the example, there are no existing applications so a new application will be entered. When creating a new application, the first step is to confirm

ALL students in the family have been entered. If needed you may click the "Return to add Students" button. All students need to be added prior to entering the application.

If all students are listed then Click Continue.

Confirm students The following are the list of students that are added to this user account.
Brown Bradley Brown Jada Brown Lisa
Please confirm that these are the list of students that are required. Or you can go back to add more Students.
Continue Return to Add Students

When Return to Add Students button is chosen the user is sent back to this screen to add additional enrolled students to the family. When finished, click the Free/Reduced Meal application button.

				e Parent and Stu	aont i ortai		
Related Students							
Student Id	Last Name	First Name	Middle Name	Grade	Birth Date	School	
401109	Brown	Bradley		1		Anywhere USA Elementary	×
401576	Brown	Jada	Helene	6		Anywhere USA MS	×
289630	Brown	Lisa	Breann	12		Anywhere USA HS	×
Add Student	l	Please be sure to ad	ld all your current stu	dents using the A	dd Student butto	on prior to continuing.	
Disclosure Category Contact Information Free\Reduced Meal Application							

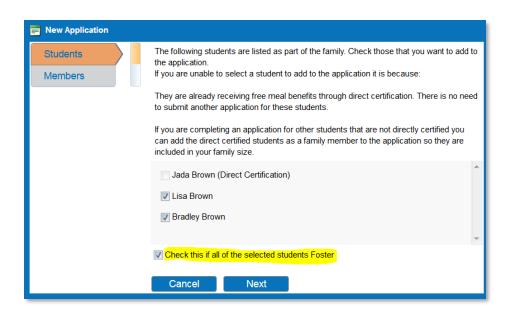
On the Select Application screen, click Create New Application.

Select Application Select the application you want to work on. Or select Create New Application to start entering a new one.	
Create New Application	^
	÷
Continue Cancel	

On the Students screen, all patrons who are part of the family are listed. Checking the box next to the name will add them to the new application the user is creating. If the user does not select a patron here, they will need to edit the application later to add the patron. If a student has already been set by a district Administrator as Direct Certification, those students will need to be added to the Members to be counted on an Income based Application. Any questions concerning Direct Certified students, the user should contact the district.

New Application	
Students	The following students are listed as part of the family. Check those that you want to add to the application.
Members	If you are unable to select a student to add to the application it is because:
	They are already receiving free meal benefits through direct certification. There is no need to submit another application for these students.
	If you are completing an application for other students that are not directly certified you can add the direct certified students as a family member to the application so they are included in your family size.
	Jada Brown (Direct Certification)
	🔄 Lisa Brown
	Bradley Brown
	Ψ.
	Check this if all of the selected students Foster
	Cancel Next

If ALL students in your family are Foster children, please check this box. In the event not all students are Foster simply select your students and click Next. You will have the ability later to select Foster on individual students.



On the Members screen, the parent creating the application is included on the application by default. Additional guardians or members of the family that were included on prior applications will be listed on this screen. In the example, Mom Test is the only guardian.

Students Members The following people are guardians or are on the previous application as members of the family. Check those that you want to add to the application. Image: Comparison of the image: Comparison	New Application	
Cancel Previous Next		family. Check those that you want to add to the application.

The next screen contains required information for the student. The assistance type, any special situation, foster child status and income are entered here. All fields must have a response in order to proceed to the next screen.

New Application		
Lisa Brown	First Name	Last Name
Bradley Brown	Lisa	Brown
Mom Test	Assistance Type Please Select	
	Special Situation:	
	Please Make a Selection	
	Foster Child	
	🔘 Yes 🔘 No	
	Earns Income	
	🔘 Yes 🔘 No	
	Ormal	
	Cancel Next	

The guardian entry screen contains required information for the guardian. To enter income, click "Yes" by "Earns Income". The user must enter the amounts and frequency for at least one income category and specify a frequency. The frequency selections are weekly, every two weeks, twice monthly, monthly and annual if the option is selected.

New Application				
Lisa Brown	First Name	Last Name		
	Mom	Test	Income From Work:	Select Income Erequency 💌
Bradley Brown	Assistance Type		Welfare/Child Support/Alimony:	Select Income Frequency
Mom Test	None of These Earns Income		Pension,Retirement,SSI,VA,SS:	Select Income Frequency
	🖲 Yes 🔘 No		Other Income (PFD):	Select Income Frequency
	Cancel Previou	s Finish		

After clicking "Finish", the screen displays the required statements associated with the application process.

Home Help								
	Free and Reduced Application Processing							
	Application Not Signed							
Statements	The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not submit all needed information, we cannot approve your child for free or reduced-price meals. You must include the last four digits of the social security number of the adult							
Instructions	household member who signs the application. The social security number is not required when you apply on behalf of a foster child or you list a Food Assistance (FA), Family Investment Program (FIP) or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you							
Students	Students indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child eligible for free or reduced-price meals, and for administration and enforcement of the lunch and breakfast programs. We may share your eligibility information							
Members	education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of programs rules.							
Summary	This institution is an equal opportunity provider							
Sign								
	Finish Later Continue							
	Copyright© 2008-2017 by PaySchools - Version: 2017.6.0.1617 Privacy Policy							

The Instructions screen contains detailed information on how to correctly report benefits and income, along with a detailed definition of each benefit/income type. This information is contained in the application in window with a scroll bar. All details have been listed from that window. A link for translated Applications is listed at the bottom of the instructions.

Home Help 📲 Logout								
	Free and Reduced Application Processing							
	Application Not Signed							
Statements	INSTRUCTIONS FOR APPLYING	*						
Instructions	Please read this in it's entirety before proceeding A HOUSEHOLD MEMBER IS ANY CHILD OR ADULT LIVING WITH YOU.							
	IF ANY HOUSEHOLD MEMBER RECEIVES BENEFITS FROM SNAP, TANF, OR FDPIR, AND THAT FAMILY MEMBER IS A STUDENT FOLLOW THESE INSTRUCTIONS:	=						
Students	Go to Students: Make sure the student(s) receiving benefits from an Assistance Program have their case numbers entered and all students in the family are listed.							
Members	Go to Household Members: If not already listed, add the household member who will be electronically signing the application. You do not need to enter income information. Go to Sign Application: Sign the form. The last four digits of a Social Security Number are not necessary, you can select No SSN. Contact information is optional but recommended if we need to contact you.							
Summary	IF ANY HOUSEHOLD MEMBER RECEIVES BENEFITS FROM SNAP, TANF, OR FDPIR, AND THAT FAMILY MEMBER IS NOT A STUDENT FOLLOW THESE INSTRUCTIONS:							
Sign	Go to Students: Make sure all students in the family are listed. You do not need to enter income information for students. Go to Household Members: If not listed, add the family member who is receiving the benefits and add them including their case number.							
Sign	If not already listed, add the household member who will be electronically signing the application. You do not need to enter income information. Go to Sign Application: Sign the form. The last four digits of a Social Security Number are not necessary you can select No SSN. Contact information is optional but recommended if we need to contact you.							
	On to Sign representation Sign reproductions me last output so botca declarity functioner are not interested you can select the Safe Montax Intermative Contracting Montax Intermative Con							
	INSTRUCTIONS:							
	Go to Students: Make sure all students in the family are listed. Indicate which of the above situation applies to each student. You do not need to enter income information. Go to Household Members: Add the household member who will be electronically signing the application. You do not need to enter income information.							
	Go to Sign Application: Sign the form. The last four digits of a Social Security Number are not necessary you can select No SSN. Contact information is optional but recommended if we need to contact you.							
	Contact the school liaison for further assistance. IF NO ONE IN YOUR HOUSEHOLD GETS SNAP, TANF, OR FDPIR BENEFITS AND IF ANY, BUT NOT ALL, OF THE CHILDREN IN YOUR HOUSEHOLD ARE HOMELESS, A MIGRANT OR RUNAWAY							
	FOLLOW THESE INSTRUCTIONS:							
	Go to Students: Make sure all students in the family are listed. Indicate which of the above situation applies to the student. If the child earns a steady income enter that information.	Ŧ						
Go to Sign App IF NO ONE IN CHILDREN FI Go to Students Go to Students Go to Students Go to Sign App ALL OTHER I Go to Students Go to Students Go to Students Go to Students Income Of A C Only include in Income From 1 Wages, salarie Net income from	Go to Household Members: Add the household member who will be electronically signing the application. You do not need to enter income information. Go to Sign Application: Sign the form: The last four digits of a Social Security Number are not necessary you can select No SSN. Contact information is optional but recommended if we need to contact you. IF NO ONE IN YOUR HOUSEHOLD GETS SNAP, TANF, OR FDPIR BENEFITS AND IF NO CHILD IS HOMELESS, A MIGRANT OR RUNAWAY, AND IF ANY, BUT NOT ALL CHILDREN ARE FOSTER CHILDREN FOLLOW THESE INSTRUCTIONS: Go to Students: Make sure all students in the family are listed. Indicate which student(s) is a foster child. If the student earns a steady income enter that information. Go to Students: Sign the form and list the last four digits of their Social Security Number or mark No SSN if you do not have one. Contact information is optional but recommended if we need to contact you. ALL OTHER HOUSEHOLDS, INCLUDING WIC HOUSEHOLDS, FOLLOW THESE INSTRUCTIONS: Go to Students: Make sure all students in the family are listed. If the child earns a steady income enter that information. Go to Students: Make sure all students in the family are listed. If the child earns a steady income enter weat finding member. Go to Students: Make sure all students in the family are listed. If the child earns a steady income enter that information. Go to Students: Make sure all students in the family are listed. If the child earns a steady income received for each family member. Go to Students: Make sure all students in the family are listed. If the child earns a steady income received for each family member. Go to Students: Make sure all students in the family are listed. If the child earns a steady income received of neach family member. Go to Students: Make sure all students in the family are listed. If the child earns a steady income received for each family member. Go to Sign Application: Sign the form and list the last four digits of their Social Security Number or mark No SSN if you do not							
Alimony or chill Note: Benefits Pension, Retire Pensions, retire Social security Supplemental 3 Disability benefi Other Income Net rental incom Interest; divider Cash withdraw Regular contrit	Supplemental security income Disability benefits							

If you would like a paper application, please contact your district administration office. Translated applications can be found here.

Finish Later

The Students screen lists the students that will be included in the current application. On this screen, clicking the Pencil icon will allow the user to edit the student's information. Clicking the X will allow you to remove the student from your application.

	Free and Reduced Application Processing									
	Application Not Signed Verify all students that are part of the family and attend the school district you are applying to are listed below and all the information about them is correct.									
Statements	_	ble Student 📗 Add New Stu		ie sonoor alsa or you are apprying to are is			Soffeet.			
Instructions	ld	Name 👻	Grade	School	Categorical?	Income?	Foster?	Other Source?		_
Students	289630	Brown, Lisa	12	Anywhere USA HS	No	No	No	No	ø	×
Members	401109	Brown, Bradley	1	Anywhere USA Elementary	No	No	No	No	ø	×
Summary								-		
Sign										
	Finish Lat	er						Previous	Conti	nue

The "Add Available Student" button will add additional Students from the family to the application. The student will need to be added to the family first. If all students are not listed, click on the Add New Student button. After adding additional students, click the Add Available Student". In this example all students in the family are already on the current application.

Add Additional Students	×
Available Students	
Jada Brown (Direct Certification)	
Lisa Brown (On Application)	
Bradley Brown (On Application)	
Add Selected	

In the Edit screen, the user must click "Update" before clicking "Continue" to save any updated information.

		Free and Reduced Applic	ation Processing			
		Application Not	Signed			
Statements	Verify all students that are part of the family a	nd attend the school district you are applying to	are listed below and all the inform	ation about them is corr	rect.	
Instructions	Add Available Student Add New Studen	it				
	ld Name ⊸	Grade School	Categorical?	Income? F	oster? Other Source?	
Students	289630 Brown, Lisa	12 Anywhere USA HS	No	No	No No	1
Members	First Name Last Name					
Summary	Lisa Brown					
	Assistance Type None of These					
Sign	Special Situation:					
	None of These					
	Foster Child					
	O Yes No					
	Earns Income O Yes O No					
	es en No	Update Cancel				
		Ouncer				
	Finish Later				Previous	s Cont
	Thish Later				Flevious	

The Member screen allows for editing member information and adding additional members. Make sure to include any non-district and Direct Certified students as part of the members. Once completed click Continue.

Free and Reduced Application Processing							
	No. 7. all bases bald as		Application Not Sign		- h	t De surs te include the second	
Statements	application.	mbers that are not students in the school dist	rict you are applying to are listed	below and all the information	about them is correc	t. Be sure to include the persor	n who will be signing
Instructions	-+ Add Member						
Students	Name	Earnings	Welfare	Pension	Other	Categorical?	
Members	Test, Mom	500 Every Two Weeks	None	None	None	None	ø
Summary							
Sign							
	•						
	Finish Later					Previ	ious Contin

The summary page will require the user to verify and confirm the household size and income for the family by checking the box then Continue.

		Free and Reduced Application Processing	
		Application Not Signed	
Statements		Please confirm the details below. Click Previous to make any changes or Continue to sign. By checking this BOX, you certify that 4 people are in your household and all family income is listed.	
Instructions			
Students	Family Members Mom Test	Students Lisa Brown	
Members	Income Information Income: \$500.00 / Every Two Weeks	Bradley Brown	
Summary	Jada Brown		
Sign			
	•	III	•
	Finish Later		Previous Continue

Once all students, members, and guardians have been added to the application and verified, it is ready to be electronically signed. The logged in user will be selected as the signer. On an income based application, the user must enter the last four digits of their Social Security number or click the checkbox "No SSN/Not Applicable".

The user can choose which language they prefer, English or Spanish. This will cause any correspondence regarding this application to be generated in the chosen preferred language, when available.

The user must enter the password they specified when they registered for their account. This confirms them as the electronic signer of the application. Clicking "Sign" completes the process.

	Free and Reduced Application Processing
	Application Not Signed
Statements	You MUST click Sign to complete your application.
Instructions	
	Signer: Mom Test
Students	Last 4 of SSN: ***** 9999 No SSN/Not Applicable
Members	Preferred Language: English
Summary	Electronic Signature
Sign	By entering my password below I certify (promise) that all the information on this application is true and that all income is reported. Lunderstand that the school will get Federal funds based on the information. I understand that if i purposely give failse information, my children may lose meal benefits, and I may be prosecuted.
	Finish Later Sign

Disclosure Choices

Once the application has been electronically signed, the user is prompted to make Disclosure Choices if they have been defined in the system by their district administrator.

The user can select the program(s) they would like to disclose meal status information to by checking the box next to the program. Please read the screen carefully as some States and Districts require that the parent OPT OUT instead of OPT IN. Opting Out lets your district know you do not wish to Share.

The user can also use the selected choices for all remaining students on the application by checking the box indicated in red below.

Iselace Choices Iselace Brown Ise Brown <th></th> <th></th> <th></th> <th></th>				
Lisa Brown Bradley Brown Sign	Disclosure Choices			
Fee Waiver	Lisa Brown Bradley Brown	for Free or Reduced Price meals. Th programs. We must have your permit this form will not change whether participation in any school nutrition pro	e information may also be used to determine your stude ssion to share your information. Please read the descript your studen(s) gef free or reduced meals. Completing th gram. Please choose the program(s) by selecting the ch wish to OPT IN and share your information with. <u>Otudent Name: Jada Drown</u>	nt(s) eligibility to receive benefits for other on for each category carefully. Completing is waiver is NOT A REQUIREMENT for neck box by each program for the ones you
Fee Waiver				
Fee Waiver Fee Waiver		Name	Description	
Cancel Next		i ee walvel		✓
Cancel Next				
				Cancel Next

The user will then be required to electronically sign the Disclosure Choices then click Finish.

📄 Disclosure Choices								
Jada Brown								
	Signer: Mom Test							
Lisa Brown	Last 4 of SSN: ***_**_							
Bradley Brown	Date Signed: 5/24/2017							
Sign	Preferred Language: English							
	Electronic Signature By entering my password below I certify (promise) that all the information on these disclosures is true and that all income is reported. I understand that the school will get Federal funds based on the information I give. I understand that if i purposely give false information, my children may lose meal benefits, and I may be prosecuted. Password:							
	Cancel Previous Finish							

The Confirmation screen shows the application was successfully signed along with the date and timestamp of the signature. At this point, the application is complete and the user can download the Disclosure Letter by clicking "Download Disclosure" and/or the Determination Letter by clicking the "Download Determination" link.

Free and Reduced Application Processing
Application Signed
The process is complete. Thank you!
Download Disclosure Download Determination

The user will be prompted to open or save the letter.

Do you want to open or save Determination.pdf (978 KB) from dbsmlddleschool.com?	Open	Save	•	Cancel	×
			_		

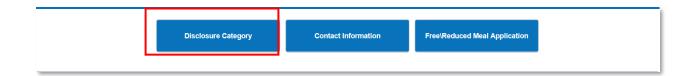
If the user ONLY entered Disclosure choices for their children, the following screen will display to download the Discloser Choice Letter. The user is not required to enter a Free and Reduced Application to complete the disclosure choices.

Disclosure Choices		
	Disclosures signed	
	The process is complete. Thank you!	
	Download Disclosure	
	Close	

This is an example of the Disclosure Letter that will be generated for the user's records.

7/21/2015		
Jane Smith 1234 Anywher	re St	
Anywhere, CC	00008 0	
Your disclosur contacting:	re options are listed below	w. You can change your choices at any time by
-		
Mary Walker, 1234 First S	St	
Anywhere, (mary walker	CO 80000 r@dbsschooldistrict.org	
Student Id	Name	
44444	Alexandria Smith	School DBS Middle School
Opt In	2016 DBS School Distr	trict (Bus transportation fee, Band, Drama)
Opt Out		
Opt Out 55555	Joe Smith	DBS Preschool
55555 Opt In		DBS Preschool trict (Bus transportation fee)
55555		
55555 Opt In		

At any time in the future, the user can log back in to the portal account and modify the choices for the Disclosure categories by clicking the "Disclosure Category" Button. The previous selections will be displayed and can be modified as needed. The user will be required to re-sign to complete the new selections chosen.



📄 Disclosure Choices			
Jada Brown Lisa Brown Bradley Brown	for Free or Reduced Price meals. T programs. We must have your perm this form will not change whether	idential Application for Free or Reduced Price Meal is only The information may also be used to determine your stud- ission to share your information. Please read the descrip your student(s) get free or reduced meals. Completing to rogram. Please choose the program(s) by selecting the co- wish to OPT IN and share your information with.	ent(s) eligibility to receive benefits for other otion for each category carefully. Completing his waiver is NOT A REQUIREMENT for
Sign	Check	Student Name: Jada Brown this box if you would like to use these choices for the re-	maining students
(Name	Description	
	Fee Waiver	Fee Waiver	
			Cancel Next

This is an example of the Determination Letter that will be generated for the user's records.

7/21/2015

Jane Smith 1234 Anywhere St. Anywhere, CO 80000

PLEASE KEEP THIS LETTER FOR YOUR RECORDS. If a duplicate letter is required, one may be provided for a fee of \$3.00 and must be picked up at the Nutrition Office at 10850 E. Woodman Rd., Falcon, Co 80831. An emailed copy can be sent at no charge. Students approved for reduced price meals in grades Pre-school to fifth will receive lunch at no charge for the 2014-2015 school year. Students approved for reduced price meals in grades 6-12 will be charged \$.40 for lunch. All students approved for reduced price meals will receive free breakfast, where breakfast is served, for the 2015-2016 school year.

If you do NOT want your child(ren) to receive Free meals or have questions, please contact James Dobbs at 555-555-3333 .

If you have any questions about this decision, please call: Carol Walker

If your application was denied, you may reapply for benefits at any time during the school year. If you are not eligible now, but have a decrease in income, an increase in household size, or qualify for food stamps, you may complete another application at that time.

Name	Denelli Level	Reason
 Alexandria Smith (44444) - (DBS Middle School)	Free	Income Within Limits
Joe Smith (55555) - (DBS Preschool)	Free	Income Within Limits

If you still do not agree with the decision, and would like to appeal, you may discuss it with a school official, Mrs. Jones, at 555-555-2121

Sincerely,

Carol Walker DBS School District 5432 E. School St. Anywhere, CO 80000 555-555-2222

*Categorical - Someone in the family is receiving federal or state assistance **Other Source - The child is foster, homeless, migrant, runaway or part of a Head Start program.

Non-Discrimination Statement:

This explains what to do if you believe you have been treated unfairly. "In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer."

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal and, where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or 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 complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program complaint please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

Persons with disabilities who wish to file a program complaint, please see information above on how to contact us by mail directly or by email. If you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). USDA is an equal opportunity provider and employer.

Clicking the "Home" button on the menu will return the user back to the original screen.

			Welcome to the	e Parent and St	udent Portal		
			R	elated Students			
Student I	Last Name	First Name	Middle Name	Grade	Birth Date	School	
401109	Brown	Bradley		1		Anywhere USA Elementary	>
401576	Brown	Jada	Helene	6		Anywhere USA MS	>
289630	Brown	Lisa	Breann	12		Anywhere USA HS	,
Add Student		Please be sure to ad	ld all your current stu	dents using the <i>i</i>	Add Student butto	on prior to continuing.	
		Disclosure Categ	jory Co	ontact Information	Free\Re	educed Meal Application	

Clicking the Free/Reduced Meal Application button will allow the user to create a new application or view the signed application.

Select Application Select the application you want to work on. Or select Create New Application to start entering a new one.	
 Application Signed On: 5/16/2017 3:01:00 AM Create New Application 	*
	Ŧ
Continue Cancel	

When a signed application is chosen, the application's information screen is displayed. This screen shows the students included on the application, the determination status, and member income information. By clicking on the links in the upper right corner of the screen, the user can print the application, determination letter, or disclosure letter. At a later date, the user may choose to decline benefits based on this application. Clicking the "Decline Benefits" button will cause this application to be disregarded when determining the student's meal status.

Id 289630 Brow Lisa 401109 Brow Brad	Name own, a own, adley	Status F	Reaso	e on Inc e Nor	come ne	Entered By: M Signed By: Te ast 4 SSN: 95 Welfare Inc None None	st, Mom		oad Applic oad Detern Other Source None None		Case Number None
Student Id Na 289630 Brow Lisa 401109 Brow Brad Family Members Name Test, Mom \$500	own, a own, adley	F	Incom	e Nor	ne	Inc None	Inc None	Inc None	Source None	Type None	Number None
Id Na 289630 Brow Lisa 401109 Brow Brad Family Members Name Test, Mom \$500	own, a own, adley	F	Incom	e Nor	ne	Inc None	Inc None	Inc None	Source None	Type None	Number None
Lisa 401109 Brow Brad Family Members Name Test, Mom \$500	a own, adley										
Brad	adley	F	Incom	e Nor	ne	None	None	None	None	None	None
Name Test, Mom \$500	ers										
Test, Mom \$500			Family Members								
	In	come		Welfar	e Inc	Pension In	c Other I	nc Assis	tance Type	e Case Numb	er
Brown, JadaNon		ery Two V	Weeks	None		None	None	None		None	
	one		1	None		None	None	None		None	
					Dec	line Benefi	as Canc	el			

The user can click "Logout" to end the session.

Home Help	Home Help Help								
Welcome to the Parent and Student Portal									
Related Students									
04-14-14	1	First Manage	Katalan Klassa	0	Didis Dist.	A-11			

Password Recovery

If the user has forgotten their password, they can click "Forgot Password" from the main login screen to start the reset process.

PaySchools Admin	
username	
password	Login
Register Forgot Password Help	

The user is prompted to enter their user ID.



Once the user name is confirmed, the next screen prompts the user to enter the answer to the security question they entered when first creating the account and a new password is entered.

PaySchools Admin		
Your user was located. Please answer the question below and select a new password. User Id: tee@mom.com		
Question: dog		
Answer:		
Password:		
Confirm Password:		
Password must contain a number, a lowercase letter, an		
uppercase letter,		
and be between 8 and 20 characters long.		
Back to Sign In page		

If the information entered is correct, clicking "Continue" redirects the user back to the site's login page. The user can now enter their newly set password to login.

Pay Schools Admin	
tee@mom.com	
password	Login
Register Forgot Password Help	

We hope this Tutorial has been helpful, and we are continuously expanding our library of tutorials. For technical assistance or any additional questions you might have, please contact PayForlt (operated by PaySchools) customer service at pfiadmin@payforit.net. You can also call 800-572-6642 between 8:30 a.m. to 7:30 p.m. ET Monday-Friday.