

Dear West Lyon School District Families:

This year we will continue the Backpack Program. This is a special program that requires the return of the permission slip shown below. If your child received a backpack during the **previous** school year, **YOU WILL STILL NEED TO RETURN A PERMISSION SLIP PRIOR TO RECEIVING A BACKPACK FOR THE CURRENT SCHOOL YEAR!**

On the last day of the week your child(ren) are in school, they will be given a bag of nutritious, easy-to-prepare foods for the weekend helping your family stretch its food buying dollar. This program will continue until the end of the school year, the bags will be discreetly distributed on Fridays by the end of the school day (or by the last day of school for your child each week). **There are only two requirements that you must meet in order for your child to receive the bags:**

- 1. You must complete the permission slip below and return it!**
- Your family's yearly income must be equal to or below the guidelines listed below

Household Size	Yearly
1	25,142
2	33,874
3	42,606
4	51,338
For each additional person please add \$8,732	

The program is highly confidential! The West Lyon Backpack Program helpers will not know which children receive the bags. They will simply provide the bags of food to your child's teacher and he or she will distribute the bags. Upperclassmen will have their bags put in their lockers or are able to pick up from a determined location. If you would like your child to participate, please sign and return the permission slip below as soon as possible to the school office.

If you have any questions, you may call Kelly Van Den Berg at 712-753-4917.

I give my child/children (please list name(s) below), permission to participate in the "Backpack Program."

Name: _____	Grade: _____
_____	_____
_____	_____
_____	_____
_____	_____

I understand the bags will be distributed as discreetly as possible and that I can stop my family's participation in the program at any time by contacting Kelly Van Den Berg and certify that my family's income is within the guidelines stated.

Parent/Guardian signature: _____ Date: _____

Print name: _____

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 to *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). West Lyon is an equal opportunity provider and employer."

Iowa Non-Discrimination Notice: "It is the policy of this CNP provider not to discriminate on the basis of race, creed, color, sex, sexual orientation, gender identity, national origin, disability, or religion in its programs, activities, or employment practices as required by the Iowa Code section 216.7 and 216.9. If you have questions or grievances related to compliance with this policy by this CNP Provider, please contact the Iowa Civil Rights Commission, Grimes State Office Building, 400 E. 14th St., Des Moines, IA 50319-1004; phone number 515-281-4121, 800-457-4416; web site <http://www.state.ia.us/government/crc/index.html>."

PLEASE RETURN ASAP