

# 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.

Ī	) Pays Ad	chools	
username			
password		Lo	gin
Register   Forg	got Password	Help	

#### **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.

	Pavs	chools	
		min	
		min	
elect the	type of user you would	d like to regi	ster.
I am a:	-Select-		
I am a:	-Select-		
I am a:	A11.6		Next
I am a:	-Select-		Next



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.



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

1	PaySchools	
Testing@mom.		1
password	La	ogin
Register   Forge	ot 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 ᆁ Logou	ut						
		Welco	me 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	urrent students using the Add Stu	dent button pri	or to continuing.		
	Discl	osure 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	X
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.

				<b>Related Students</b>			
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	ld all your current s	tudents using the	Add Student butt	on prior to continuing.	
		Disclosure Categ		Contact Information	Eroo\B	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	×
Enter / Confirm Contact Information	
Please enter your contact	t information and preferred delivery method.
Preferred Delivery Method: Mail  Address:	
City / State / Zip: Email Address: [ <b>test@m</b>	
Phone Number:	m.com
Sa	ve 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.	4
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.

			Re	elated 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 ad	d all your current stud	dents using the A	dd Student butto	on prior to continuing.	



On the Select Application screen, click Create New Application.

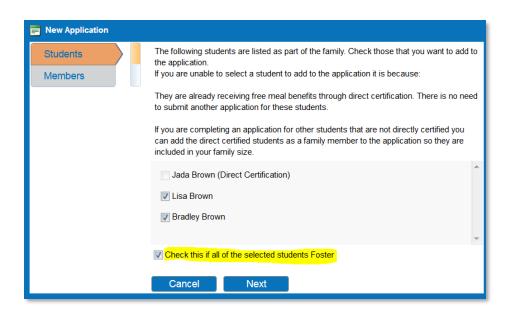
Select Application	_
Select the application you want to work on. Or select Create New Application to start entering a new one.	
Create New Application	*
	÷
Continue Cancel	

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.



New Application	
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.
	Cancel Previous Next

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		t Name
Bradley Brown	Lisa Bro Assistance Type	own
Mom Test	Please Select	
	Special Situation:	
	Please Make a Selection	
	Foster Child	
	🔘 Yes 🔘 No	
	Earns Income	
	🔘 Yes 🔘 No	
	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 Frequency
Bradley Brown	Assistance Type		Welfare/Child Support/Alimony:	Select Income Frequency
Mom Test	None of These		Pension,Retirement,SSI,VA,SS:	Select Income Frequency
	Earns Income		Other Income (PFD):	Select Income Frequency
	Cancel Previous	s Finish		

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

Home Help	S Logout					
	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	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 is eligible for free or reduced-price meals, and for administration and enforcement of the lunch and breakfast programs. We may share your eligibility information with					
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. This institution is an equal opportunity provider					
Summary						
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.



Continu

	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 FOPIR, 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	IE ANY HOUSEHOLD MEMBED DECENTES BENEETS FROM SNAD TANE OD EDDID AND THAT FAMILY MEMBED IS NOT A STUDENT FOUL OW THESE INSTRUCTIONS				
	Go to Students: Make sure all students in the family are listed. You do not need to enter income information for students.				
Sign	Go to Household Members: If not listed, add the family member who is receiving the benefits and add them including their case number. 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.				
	IF NO ONE IN YOUR HOUSEHOLD GETS SNAP, TANF, OR FDPIR BENEFITS AND IF ALL CHILDREN IN THE HOUSEHOLD ARE HOMELESS, A MIGRANT OR RUNAWAY FOLLOW THESE INSTRUCTONS:				
	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.				
	lembers: Add the household member who will be electronically signing the application. You do not need to enter income information.	1			
	tion: 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.				
	OW THESE INSTRUCTIONS:				
	ake 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.				
	lembers: Enter all household members that are not students. Enter any steady income received for each family member.				
	tion: 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. JSEHOLDS. INCLUDING WIC HOUSEHOLDS. FOLLOW THESE INSTRUCTIONS:				
	schools, including with doubschools, follow iness ins including information. Alse sure all students in the family are listed. If the child earns a steady income enter that information.				
	lambers of source in the name of the source				
	tion: 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.				
DEFINITIONS OF		=			
Income Of A Child					
Only include incom	ne if it is from a steady source. Occasional babysitting or odd jobs should not be included.				
Income From Wor	k l				
Wages, salaries, ti	ips, commissions				
	elf-owned business and farms				
Strike benefits, une Welfare, Child Sup	employment compensation, and worker's compensation				
weilare, onitu Sup	port, Aurinony	л,			
Public assistance	payments/welfare benefits (e.g., TANF, General Assistance, General Relief)				
Alimony or child su					
	er SNAP and FDPIR are not counted as income.				
	nt, SSI, VA, Social Security				
Pensions, retireme Social security	nt income, veterans' benefits				
Supplemental secu	urity income				
Disability benefits					
Other Income					
Net rental income, Interest; dividend in	annuties, net royalties				
Interest, available income Cash withdrawn from savings; income from estates, trusts and/or investments					
Regular contributio	ins from persons not living in the household				
Any other money th	Any other money that may be available to pay for the child(ren)'s meals				
		Ξ			
lf you would like a	a paper application, please contact your district administration office.				
Translate days "	ation and to found hope				
Translated applications can be found here.					

Finish Later

Home Help 📶 Logout

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						
	Verify all stude	ints that are part of the fai	aily and attend th	Application Not Sig		ion about them is (	correct			
Statements		ble Student Add New St	-	ite solidor district you are applying to are i			Soffeet.			
Instructions	ld	Name 🗸	Grade	School	Categorical?	Income?	Foster?	Other Source?	_	_
Students	289630	Brown, Lisa	12	Anywhere USA HS	No	No	No	No	1	×
Members	401109	Brown, Bradley	1	Anywhere USA Elementary	No	No	No	No	ø	×
Summary										
Sign										
	Finish Lat	er						Previous	Cont	inue

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.

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						
Statements	Verify all students that are part of the fa	mily and attend the school district you are applying to	are listed below and all the information	ation about them is	correct.			
Instructions	Add Available Student Add New S	tudent						
	ld Name 🚽	Grade School	Categorical?	Income?	Foster?	Other Source?		
Students	289630 Brown, Lisa	12 Anywhere USA HS	No	No	No	No	₿ X	
Members	First Name Last Na							
Summary	Lisa Brown Assistance Type							
	None of These							
Sign	Special Situation:							
	None of These							
	Foster Child Yes  No							
	Earns Income							
	🔘 Yes 💿 No							
		Update Cancel						
	Einich Leter					Drovieus	Continu	
	Finish Later					Previous	Continu	Je

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.

		Fre	e and Reduced Application P Application Not Sign				
Statements	Verify all household me	mbers that are not students in the school dist			about them is correc	t. Be sure to include the perso	n who will be signing th
Instructions	+ Add Member						
Students	Name	Earnings	Welfare	Pension	Other	Categorical?	
Members	Test, Mom	500 Every Two Weeks	None	None	None	None	<b>S</b> *
Summary							
Sign							
<u>-</u>							
	Finish Later					Previ	ious Continu

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			
	•		Þ
	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 By entering my password below I certify (promise) that all the information on
Sign	by energing <b>absword</b> below Tetruly (brothing that an the influence) in the second of the second that all income is reported. I understand that the school will get Federal funds based on the information I give. I understand that is hold that school officials may verify (check), the information, inderstand that i i purposely give false 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.

Disclosure Choices			
Jada Brown Lisa Brown Bradley Brown Sign	for Free or Reduced Price meals. Th programs. We must have your permis this form will not change whether participation in any school nutrition pro	Iertial Application for Free or Reduced Price Meal is online information may also be used to determine your studission to share your information. Please read the descrip your student(s) get free or reduced meals. Completing to gram. Please choose the program(s) by selecting the owish to OPT IN and share your information with. <u>Ottoent Name: Jada Brown</u> this boy if you would like to use these choices for the re- time.	ent(s) eligibility to receive benefits for other tion for each category carefully. Completing his waiver is NOT A REQUIREMENT for check box by each program for the ones you
	Name Fee Waiver	Description Fee Waiver	
			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 dbsmiddleschool.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.



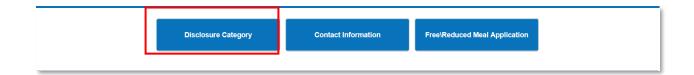
Disclosure Choices		
	Disclosures signed	
	The process is complete. Thank you!	
	Download Disclosure	
	Close	

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



7/21/2015		
Jane Smith 1234 Anywhere Anywhere, CO		
Your disclosure contacting:	e options are listed below.	You can change your choices at any time by
Mary Walker, A 1234 First St Anywhere, C mary.walker	it	
Student Id	Name	School
Student Id	Name Alexandria Smith	School DBS Middle School
	Alexandria Smith	
44444 Opt In	Alexandria Smith	DBS Middle School
44444 Opt In Opt Out	Alexandria Smith 2018 DBS School Distric Joe Smith	DBS Middle School ot (Bus transportation fee, Band, Drama)
44444 Opt In Opt Out 55555 Opt In	Alexandria Smith 2018 DBS School Distric Joe Smith	DBS Middle School ot (Bus transportation fee, Band, Drama) DBS Preschool
44444 Opt In Opt Out 55555 Opt In	Alexandria Smith 2018 DBS School Distric Joe Smith	DBS Middle School ot (Bus transportation fee, Band, Drama) DBS Preschool
44444 Opt In Opt Out 55555 Opt In	Alexandria Smith 2018 DBS School Distric Joe Smith	DBS Middle School ot (Bus transportation fee, Band, Drama) DBS Preschool
44444 Opt In Opt Out 55555 Opt In	Alexandria Smith 2018 DBS School Distric Joe Smith	DBS Middle School ot (Bus transportation fee, Band, Drama) DBS Preschool
44444 Opt In Opt Out 55555 Opt In	Alexandria Smith 2018 DBS School Distric Joe Smith	DBS Middle School ot (Bus transportation fee, Band, Drama) DBS Preschool
44444 Opt In Opt Out 55555 Opt In	Alexandria Smith 2018 DBS School Distric Joe Smith	DBS Middle School ot (Bus transportation fee, Band, Drama) DBS Preschool
44444 Opt In Opt Out 55555 Opt In	Alexandria Smith 2018 DBS School Distric Joe Smith	DBS Middle School ot (Bus transportation fee, Band, Drama) DBS Preschool
44444 Opt In Opt Out 55555 Opt In	Alexandria Smith 2018 DBS School Distric Joe Smith	DBS Middle School ot (Bus transportation fee, Band, Drama) DBS Preschool
44444 Opt In Opt Out 55555 Opt In	Alexandria Smith 2018 DBS School Distric Joe Smith	DBS Middle School ot (Bus transportation fee, Band, Drama) DBS Preschool

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 Sign	for Free or Reduced Price meals. Th programs. We must have your permi this form will not change whether participation in any school nutrition pro	dential Application for Free or Reduced Price Meal is only he information may also be used to determine your stude ssion to share your information. Please read the descrip your student(s) get free or reduced meals. Completing th ogram. Please choose the program(s) by selecting the c wish to OPT IN and share your information with. Student Name: Jada Brown this box if you would like to use these choices for the rer	ent(s) eligibility to receive benefits for other tion for each category carefully. Completing its waiver is NOT A REQUIREMENT for heck box by each program for the ones you
	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 duplic and must be picked up at the Nutrition Office at 10850 E. Woodma charge. Students approved for reduced price meals in grades Pre school year. Students approved for reduced price meals in grade: reduced price meals will receive free breakfast, where breakfast is	an Rd., Falcon, Co 80831. An -school to fifth will receive lund s 6-12 will be charged \$.40 for	emailed copy can be sent at no ch at no charge for the 2014-20 lunch. All students approved for
f you do NOT want your child(ren) to receive Free meals or have		-
If you have any questions about this decision, please call: Carol W	alker	
If your application was denied, you may reapply for benefits at any have a decrease in income, an increase in household size, or qua that time.		
Name	Benefit Level	Reason
lexandria Smith (44444) - (DBS Middle School)	Free	Income Within Limits
pe Smith (55555) - (DBS Preschool)	Free	Income Within Limits
DBS School District 5432 E. School St.		
555-555-2222 *Categorical - Someone in the family is receiving federal or state a		n.
*Categorical - Someone in the family is receiving federal or state a **Other Source - The child is foster, homeless, migrant, runaway of Non-Discrimination Statement: This explains what to do if you believe you have been treated of Agriculture policy, this institution is prohibited from discriminatin disability. To file a complaint of discrimination, write USDA, Direct Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voi	or part of a Head Start program unfairly. "In accordance with I g on the basis of race, color, n or, Office of Adjudication, 140( ce). Individuals who are heari	Federal Law and U.S. Departm lational origin, sex, age, or D Independence Avenue, SW, ng impaired or have speech
Anywhere, CO 80000 555-555-2222 *Categorical - Someone in the family is receiving federal or state a **Other Source - The child is foster, homeless, migrant, runaway of Non-Discrimination Statement: This explains what to do if you believe you have been treated of Agriculture policy, this institution is prohibited from discriminatin disability. To file a complaint of discrimination, write USDA, Direct Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voi disabilities may contact USDA through the Federal Relay Service equal opportunity provider and employer." The U.S. Department of Agriculture (USDA) prohibits discrimi employment on the bases of race, color, national origin, age, disal applicable, political beliefs, marital status, familial or parental status derived from any public assistance program, or protected genetic conducted or funded by the Department. (Not all prohibited bases wish to file a Civil Rights program complaint_filing_cust.html, or a You may also write a letter containing all of the information reques us by mail at U.S. Department of Agriculture, Director, Office of Ac D.C. 20250-9410, by fax (202) 690-7442 or email at program.infal speech disabilities and wish to file either an EEO or program.com	or part of a Head Start program unfairly. "In accordance with I g on the basis of race, color, n ro, Office of Adjudication, 1400 ice). Individuals who are heari at (800) 877-8339; or (800) 84 nation against its customers, o bility, sex, gender identity, reli is, sexual orientation, or all or information in employment or will apply to all programs and uplete the USDA Program Disa it any USDA office, or call (86 sted in the form. Send your co ijudication, 1400 Independence e@gusda.gov.Individuals who	Federal Law and U.S. Departm national origin, sex, age, or 0 Independence Avenue, SW, 15-6136 (Spanish). USDA is an employees, and applicants for gion, reprisal and, where part of an individual's income is in any program or activity for employment activities. JIf you crimination Complaint Form, fot 0; 632-9992 to request the form mpleted complaint form or lette se Avenue, S.W., Washington, are deaf, hard of hearing, or ha

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



			Welcome to the	Parent and St	udent Portal		
			Re	lated 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 ac	id all your current stud	lents using the <i>l</i>	Add Student butto	on prior to continuing.	
		Disclosure Categ	gory Ca	ntact 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.	
<ul> <li>Application Signed On: 5/16/2017 3:01:00 AM</li> <li>Create New Application</li> </ul>	*
	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.

Current Ap	plication	Informati	on							
Application Id: 559     Entered By: Mom Test     Download Application       Status: Free     Signed By: Test, Mom     Download Determination       Last 4 SSN: 9999										
Students										
Student Id	Name	Status	Reason	Income	Welfare Inc	Pension Inc	Other Inc	Other Source	Assistance Type	Case Number
289630 Br Lis	rown, sa	F	Income	None	None	None	None	None	None	None
	rown, radley	F	Income	None	None	None	None	None	None	None
Family Membe	ers									
Name	In	come	W	elfare Inc	Pension In	c Other I	nc Assis	stance Type	e Case Numb	er
Test, Mom \$5	500.00 Ev	ery Two	WeeksNo	ne	None	None	None		None	
Brown, JadaNo	one		No	ne	None	None	None		None	
				Dec	line Benefit	s Canc	el			

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

Home Help	Logout						
			Welcome to the Pa	rent and Studen	t Portal		
			Relate	d Students			
04-14-14	1	First Manage	Katalan Klassa	0	Didis Dist.	0.1	

## **Password Recovery**

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



PaySch Adm	ools
username	
password	Login
Register   Forgot Password   Hel	p

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 passwor I. 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.
Continue
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.

PaySchools 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 PaySchools customer service at <a href="mailto:support@payschools.com">support@payschools.com</a>. You can also call 800-669-0792 between 8:30 a.m. to 7:30 p.m. ET Monday-Friday.