

Waiver of Confidentiality

Lawrence Public Schools

Dear Parent/Guardian:

This form is required for fee waiver, it is not required to get reduced price or free Child Nutrition Program benefits for your children.

To save you time and effort, information about your children's eligibility for reduced price or free Child Nutrition Program benefits may be shared with other programs for which your children may qualify. For the programs listed below, we must have your permission to share your information.

Yes, I DO want school officials to share information about my children's eligibility for Child Nutrition Program benefits to determine eligibility for the fee payment waiver.

This **includes** the following fees that would be applicable to your child(ren):

- textbook rental fee
- instructional materials fee
- technology fee
- activity/ transportation fee
- supplemental enrollment fee
- participation fee
- co-curricular fee

If you are temporarily approved for Child Nutrition Program benefits, you do NOT qualify for the fee waiver.

If you checked yes to the box above, fill out the information below which will be only shared to obtain the fee waiver (**Please Print**).

Child's Name: _____ School: _____

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Child's Name: _____ School: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Address: _____

For more information, you may call:

Food Services Department at phone number: 832-5000

Return this form to:

Address: Food Services Office
110 McDonald Dr
Lawrence, KS 66044

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