



**Waiver of Confidentiality 2024-2025
Required to Extend Your Child(ren)'s Benefits to Non-Food Service
Programs at SCPA**

*Optional: You do not have to complete this page to qualify for free or reduced school meals.

Dear Parent/Guardian:

If your child(ren) qualifies for educational benefits, your student(s) may also be eligible for other benefits. In order to extend these additional benefits to your family, SCPA must obtain a release of information waiver from you. This waiver will allow the SCPA staff who manage school meal benefits to provide your eligibility status to the staff who manage the programs to which you wish your family's educational benefits be applied. Complete this form and return to the main office of St. Croix Preparatory Academy, email to mthole@stcroixprep.org or mail to 4260 Stagecoach Trail N., Stillwater, MN 55082. For questions, please call Marianne Thole at 651-395-5915.

Please check the appropriate box below if you would like to waive confidentiality to receive information for any of the benefits listed below. I understand that this may result in reduced or free fees for eligible athletic and school activities. (A list of applicable activities is available in the current SCPA Family Handbook.)

- SCPA Athletics and Activities Waiver:** YES. SCPA officials may release my child(ren's) free and reduced priced meal eligibility status to the school Activities Director.
- SCPA Fieldtrips and other Optional Classroom Fees:** YES. SCPA officials may release my child(ren's) free and reduced priced meal eligibility status to School Office Managers and Classroom Teacher.
- SCPA Background Check Fees and Technology Fees:** YES. SCPA officials may release my child(ren's) free and reduced priced meal eligibility status to School Office Managers.
- SCPA Used School Uniform Distribution:** YES. SCPA officials may release my child(ren's) free and reduced priced meal eligibility status to School Parent Group Liaison and Uniform Sale Coordinator.

I understand that I will be releasing information that will show that I applied for free and reduced price school meals for my child(ren). I give up my rights to confidentiality for the above marked purpose(s) only. This authorization is in effect for one year. I understand that I may revoke this release in writing at anytime.

I certify that I am the parent/guardian of the child(ren) for whom the application is being made.

Signature of Parent/Guardian

Printed name of Parent/Guardian

Address: _____

Name of student(s): _____

Date signed: _____

Phone number: _____

**NOTE: YMCA EXTENDED DAY SCHOLARSHIPS AVAILABLE -
CONTACT JESS KEYES AT Jess.Keyes@ymca.mn.org.**



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In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. Mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
2. Fax: (833) 256-1665 or (202) 690-7442; or
3. Email: program.intake@usda.gov

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