SHARING INFORMATION WITH OTHER PROGRAMS

Dear Parent/Guardian:		2025-2026 School Year
To save you time and effort, the information you game way be shared with other programs for which your chave your permission to share your information. Serfree or reduced-price meals.	children may qualify. For the follow	ing programs, we must
This signed waiver form must be received <u>within th</u>		
oriced meals in order for fees to be waived. The qu	-	
received stating your children receive free or reduc		
qualification date, please contact Kimi Pasewald at	: 920-386-4404 ext. 1001 or pasewo	ald@dodgeland.k12.wi.u
Yes! I <u>DO</u> want school officials to share info Application with the District Office and Gra following items:		
- Material Fees:		
Half-Day Early Childhood	\$15	
Grades 4K-5	\$25	
Grades 6-8	\$35	
Grades 9-12	\$40 Includes Student ID	
 Co-Curricular/Athletic Participation Fees 		
Grades 6-8	\$30/Student/Year	
Grades 9-12	\$30/Activity - \$70/Year Maximum	
- Miscellaneous Fees		
Art Supply Fee - Grades 9-12	\$15/Class/Semester	
Beginner Band Book	\$15/Year	
Instrument Rental	\$40/Year	
Pottery Fee – Grades 9-12	\$25/Class/Semester	
Technology Education Fee	\$10/Class/Semester	
Woods/Metals Fee	\$25/Class/Semester	
No! I <u>DO NOT</u> want school officials to sha Meals Application. If you checked the "yes" box above, fill out the form child(ren) listed below.		
Child's Name		Grade
Child's Name		Grade

Grade

Child's Name

Child's Name	Grade
Child's Name	Grade
Parent/Guardian Signature	Date
Print Parent/Guardian Name	
Address	
Address	
Return this form as soon as possible to: Dodgeland School District, Attn: Kimi Pasewald, 401 South Western Avenue, Juneau, WI 530	039

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/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.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; or

fax:

(833) 256-1665 or (202) 690-7442; or

3. email:

program.intake@usda.gov

This institution is an equal opportunity provider.