



Dear Yinghua Students, Families, and Community Members,

As we launch the 2024-2025 school year, I am brimming with excitement and anticipation for the incredible journey ahead. It is with great joy that I welcome both our new and returning families to our vibrant, ever-growing community, where learning and growth are at the heart of everything we do.

This year, we are thrilled to continue our partnership with the school board to bring our strategic plan to life. Our focus remains steadfast on nurturing our students, supporting our teachers, and fostering a community of confident, kind, and respectful global citizens. Together, we will ensure that our connections with the world are not only meaningful but transformative.

To ensure a fantastic start to the school year, here are a few key highlights:

1. Breakfast Program & Morning Routine

We are excited to continue offering our free meal program! Breakfast will be available starting at 8:00 AM daily in the school cafeteria for Grades 2-8 and in the classrooms for Kindergarten and 1st grade. We encourage you to send your children to school as early as 8:00 AM, so they can enjoy a breakfast and get ready for the day ahead.

Our morning meeting, beginning promptly at 8:30 AM, is a cornerstone of our school day. It sets a positive tone for learning, fosters connections between students, teachers, and peers, and builds a strong sense of community. To help us get off to a smooth start, please ensure that students arrive by 8:25 AM. Note that Door 14 (the Fillmore drop-off entrance) will close at 8:25 AM. Students arriving after this time should enter through Door 2 at the school's main entrance to ensure their attendance is recorded.

2. New Learning Support Schedule

We are thrilled to introduce an exciting new initiative for Grades 2-8 this year, aimed at providing tailored support and challenges for every student. Our refreshed daily schedule will feature dedicated time for reinforcing learning, solidifying foundational skills, and engaging in small group support sessions. This initiative is designed to help every student thrive, with early interventions to tackle learning gaps before they grow.

Join us on Monday, August 26, for "Meet Your Teacher" night, where I'll be at my station in the cafeteria to share an overview of the new schedule. We'll dive deeper into this initiative and how it will enhance your child's learning experience during our Curriculum Nights—September 10 for the middle school and September 17 for the lower school. Be sure to mark these dates on your calendar and join us for these important events!

3. Kindergarten Screening During "Meet Your Teacher" Night

For the first time, kindergarten students will be assessed for reading development during "Meet Your Teacher" night.

This year, a new state initiative will be implemented in all schools across the state in an effort to improve reading for all students. Part of this initiative, called the READ Act, is that all students grades kindergarten through third grade will be screened for reading to ensure students receive academic support when needed. To ensure students in kindergarten and first grade are screened at a time that does not interfere with the full immersion Chinese language curriculum, kindergarten students will be screened during "Meet Your Teacher" night, and first grade students will be screened over the first few weeks of school during homeroom time at the end of the day.

The assessment selected for the screening is the mDIBBLES 8th Edition assessment. It takes approximately 7 minutes and assesses students ability to hear and replicate separate sounds (Phonemic Awareness), and their understanding of letter-sound association (Phonics).

During "Meet Your Teacher" night, there will be stations in the Library where students and parents can come and meet with one of the English teachers. The teacher will administer the short assessment and parents are invited to sit and listen to their student's answers.

4. Staff Updates & Focus on School Culture

We are delighted to welcome Ms. Shu-Mei Lai as our new Lower School Chinese Academic Director. With her extensive experience in immersion teaching, she is poised to guide our students toward even greater success. Alongside Ms. Wu, our Middle School Chinese Academic Director, and Ms. Lori Magstadt, our English Academic Director, we have a dynamic and dedicated academic leadership team. I am confident this year will bring enhanced support for our teachers and impressive academic growth for our students.

We are also excited to welcome 13 intern teachers from Beijing Normal University, who will join us for ten months. Their involvement will enrich our school culture and provide valuable support to our students and teachers. We extend our heartfelt thanks to our parent group, YACA, for their warm welcome and continued support of our new staff.

Class assignments will be shared on the evening of August 25 via Infinite Campus (IC) message, just before "Meet Your Teacher" night. We carefully assign students to build strong, supportive communities that maximize learning. If you have any questions or need assistance, please don't hesitate to reach out to me directly.

As we embark on this exciting new year with these wonderful initiatives, I feel truly fortunate to have each of you as part of our community. Thank you for your ongoing partnership and support. I eagerly look forward to seeing you at our upcoming events and working together to make this school year outstanding for all our students.

Warmest regards,



Dr. Luyi Lien
CEO/Executive Director
Yinghua Academy

MEET OUR TEAM!



2024-2025



LUYI LIEN 連鷺役 CEO/EXECUTIVE DIRECTOR

LUYI.LIEN@YINGHUAACADEMY.ORG

Dr. Lien is responsible for the overall excellence of the school. She is excited to collaborate with the Board, the parents, the teachers and staff, and the broader community to ensure we stay true to the school mission.



LORI MAGSTADT

DIRECTOR OF ENGLISH INSTRUCTION

Ms. Magstadt oversees English Language instruction, developing a comprehensive English Language Arts Curriculum that enhances students' reading skills and deepens their worldviews, and implements small group interventions to assist struggling readers.

LORI.MAGSTADT@YINGHUAACADEMY.ORG



FANG WU

DIRECTOR OF MS CHINESE INSTRUCTION

Ms. Wu directs MS Chinese Language instruction, implementing a nationally recognized Chinese immersion program, supporting Chinese cultural events that broaden students' understanding of Chinese and the world, and establishes support for students learning Chinese.

FANG.WU@YINGHUAACADEMY.ORG

Join Us

MEET YOUR TEACHER

Monday, August 26

**Grades K-4
4 pm-6 pm**

**Grades 5-8
5 pm-7 pm**



SHUMEI LAI

DIRECTOR OF LS CHINESE INSTRUCTION

Ms. Lai aims to inspire educators to embrace effective teaching strategies, develop inclusive curricula, and create supportive learning spaces. Her goal is to lead initiatives that enhance student engagement in learning of Chinese language and culture, foster resilience, and prepare learners for future success.

SHUMEI.LAI@YINGHUAACADEMY.ORG



SHERRY EDWARDS

STUDENT DEVELOPMENT AND FAMILY LIAISON

Ms. Edwards' title has changed, it reflects the goals of the position, to emphasize the growth and progress of our students. Supporting YA students is paramount to academic and social emotional success. She looks forward to providing strategies to staff, students and families in support of positive behavior, and creating and maintaining strong relationships, as well as implementing school safety policies.

SHERRY.EDWARDS@YINGHUAACADEMY.ORG



TING-WEN CHEN

SPECIAL EDUCATION COORDINATOR

Dr. Chen oversees special education staff in developing programming for special education students, provides a comprehensive system for staff development to assure compliance and to improve skills in research-based practices, and collaborates with Directors to ensure effective special education programming.

TING-WEN.CHEN@YINGHUAACADEMY.ORG

聯繫 英華

CONTACT US

OFFICE STAFF

PROVIDES FAMILIES

WITH GENERAL INFORMATION

1616 BUCHANAN STREET NE,

MINNEAPOLIS, MN 55413,

+1 (612) 788-9095 TEL,

+1 (612) 788-9079 FAX,

INFO@YINGHUAACADEMY.ORG

SCHOOL DAY: 8:30 AM TO 3:30 PM

OFFICE HOURS: 7:45 AM - 4:15 PM

英華

YINGHUA
ACADEMY

MEET YOUR TEACHER

Monday,
August 26

A great opportunity for students to peek into their classroom, drop off school supplies, and say hello to their teacher! This event is student focused.

GRADES K-4
4-6 p.m.

Kindergarten Families don't forget to visit our library for a short reading development assessment during Meet Your Teacher Night.

GRADES 5-8
5-7 p.m.



Used
Uniform
Sale



WELCOME TO KINDERGARTEN

KG MEET YOUR TEACHER CHECKLIST

- Find Your Classroom
- Meet Your Teacher
- Drop Off Supplies
- Visit YA's Library
and
- Pick Up
Your YA T-Shirt
and Red Dragon

We are so excited for your family to join us for the 2024-2025 school year.

We know choosing your child's school is a tough decision, and we are happy that you have chosen Yinghua Academy.

This year, a new state initiative, the READ Act, will be implemented in all schools across the state in an effort to improve reading for all students. During "Meet Your Teacher" night, there will be stations in the library where students and parents can come and meet with one of the English teachers. The teacher will administer the short assessment and parents are invited to sit and listen to their student's answers.



Paper Form- bring to Main Office with Voided Check attached			
	Due Date	Form Name	Information
Required	No deadline Forms accepted all year.	ACH	Authorize automatic payment of school expenses; return your form with a canceled check or deposit slip.

Online Form			
	Due Date	Form Name	Information
Required	Immediately	Student Health Form 24-25	All students are required to submit this health form. Any questions can be directed to Nurse Ginger Hao (ginger.hao@yinghuaacademy.org)
Required	Immediately	Yinghua Boonli	Please place August and September lunch orders by August 20. If you are new to Yinghua Boonli, please visit the lunch webpage for instructions.
Required	Before the student's first day of school	Publicity and Photo Release	Define how your child may appear in Yinghua publicity and photos
Required	No deadline	Free Meal Ordering Guide	Guidelines and information for Yinghua's school-provided free meals, breakfast and lunch

Online or Paper Form			
	Due Date	Form Name	Information
Optional	Forms are accepted all year.	Application for Educational Benefits	Both forms are required for a student to become eligible for consideration.
Optional	Forms are accepted all year.	Waiver of Confidentiality	Both forms are required for a student to become eligible for consideration.
Optional	No deadline	Digital Equity Form	Please fill out one form per household. The Minnesota Department of Education is requesting we collect this information from all households.
Optional	No deadline	Ethnic and Racial Demographic Designation Form	Read more on MDE's website

Dear Parent/Guardian:

Children need healthy meals to learn. Yinghua Academy offers healthy meals every school day. All students can get one breakfast and one lunch free of charge each day at our school. Although no application is required to receive this free meal benefit, filling out Application for Educational Benefits is still important! Your child(ren) may qualify for other benefits like reduced fees at school. Your application may also help the school qualify for education funds, discounts, and other meal programs.

Who should complete this application? Children in households participating in the Supplemental Nutrition Assistance Program (SNAP), Minnesota Family Investment Program (MFIP) or Food Distribution Program on Indian Reservations (FDPIR), and foster, homeless, migrant and runaway children qualify without reporting household income. Alternatively, children can qualify if their household income is within the maximum income shown for their household size on the instructions.

To apply for free or reduced price meals, complete the enclosed Application for Educational Benefits. We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to:

Yinghua Academy (Attn: Helen Hindrawati)
1616 Buchanan St. NE, Minneapolis, MN 55413

Common Questions:

I get WIC or Medical Assistance. Can my children qualify? Children in households participating in WIC or Medical Assistance do not automatically qualify. Children may be eligible depending on other household financial information. Please fill out an application.

Who should I include as household members? Include yourself and all other people living in the household, related or not (such as grandparents, other relatives, or friends).

May I apply if someone in my household's member is not a U.S. citizen? Yes. You and your children do not have to be U.S. Citizens for you to complete an application.

What if my income is not always the same? List of the amount that you normally get. If you normally get overtime, include it, but not if you get overtime only sometimes. For seasonal work, write in the total annual income.

Will the income information or case number I give be checked? It may be. We may also ask you to send written proof.

How will the information be kept? Information you provide on the form, and your child's approval, will be protected as private data. For more information, see the back page of the Application for Educational Benefits.

If I don't qualify now, may I apply later? Yes. Please complete an application at any time if your income goes down, your household size goes up, or you start getting SNAP, MFIP, or FDPIR benefits.

If you have other questions or need help, call (612)788-9095

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, 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 household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you 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 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 program rules. 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 2. fax: (833) 256-1665 or (202) 690-7442; or 3. email: program.intake@usda.gov This institution is an equal opportunity provider

How to Complete the Application for Educational Benefits

Complete the Application for Educational Benefits form for school year 2024–25 if any of the following applies to your household:

- Any household member currently participates in the Minnesota Family Investment Program (MFIP), or the Supplemental Nutrition Assistance Program (SNAP), or the Food Distribution Program on Indian Reservations (FDPIR) or
- The household includes one or more foster children (a welfare agency or court has legal responsibility for the child) or
- The total income of household members is within the guidelines shown below (**gross earnings before deductions**, not take-home pay). Do not include as income: foster care payments, federal education benefits, MFIP payments, or value of assistance received from SNAP, WIC, or FDPIR. Military: Do not include combat pay or assistance from the Military Privatized Housing Initiative. The income guidelines are effective from July 1, 2024 through June 30, 2025.

Maximum Total Income

Household size	\$ Per Year	\$ Per Month	\$ Twice Per Month	\$ Per 2 Weeks	\$ Per Week
1	27,861	2,322	1,161	1,072	536
2	37,814	3,152	1,576	1,455	728
3	47,767	3,981	1,991	1,838	919
4	57,720	4,810	2,405	2,220	1,110
5	67,673	5,640	2,820	2,603	1,302
6	77,626	6,469	3,235	2,986	1,493
7	87,579	7,299	3,650	3,369	1,685
8	97,532	8,128	4,064	3,752	1,876
Add for each additional person	9,953	830	415	383	192

Step 1: Children

List all infants and children in the household, their school and grade if applicable, and birthdate. Attach an additional page if needed to list all children. Check the box if a child is in foster care (a welfare agency or court has legal responsibility for the child).

Step 2: Case Number

If any household member currently participates in SNAP, MFIP or FDPIR, write in the case number and then go to Step 4. If you do not participate in any of these programs, leave Step 2 blank and continue on to Step 3.

Step 3: Adult and Child Incomes / Last 4 Digits of Social Security Number

- **Social Security Number/Total Household Members.** An adult household member must provide the last four digits of their Social Security number or check the box if they do not have a Social Security number. Report the total number of household members and ensure all household members are listed individually on the application in the child or adult section as applicable.
- **Child Income.** If any children in the household have regular income, such as SSI or part-time jobs, list the total amount of regular incomes received by all children, and check the box for the frequency: weekly, bi-weekly, twice a month, or monthly. Do not include occasional earnings like babysitting or lawn mowing.
- **Adult income.** Report the names of adult household members and income earned in this section.
 - List all adults living in the household not listed in Step 1, whether related or not, such as grandparents, relatives, or friends.
 - **Gross Earnings from Work.** This is usually the money received from working at jobs where a paycheck is received. For each income, check the box to show how often the income is received: weekly, bi-weekly, twice per month, or monthly.
 - List gross incomes before deductions, not take-home pay. Do not list an hourly wage rate. For adults with no income to report, enter a '0' or leave the section blank. For seasonal work, write in the total annual income.
 - **Are you Self-Employed or a Farmer?** List the net income per month or year after business expenses. Do not list the same income twice on the application. A loss from farm or self-employment must be listed as 0 income and does not reduce other income.
 - **Any Other Gross Income.** List gross incomes before deductions from all other sources, such as SSI, unemployment, child support, public assistance, social security, rental income or annuities.

Step 4: Signature and Contact Information An adult household member must sign the form. If you do not want your information to be shared with Minnesota Health Care Programs, check the "Don't share" box in Step 4.

Optional: Please provide the information on ethnicity and race that is requested on the second page of the form. This information is not required and does not affect approval for school meal benefits. The information helps to ensure we are meeting civil rights requirements and fully serving our community.



2024-25 Application for Educational Benefits

Complete one application per household for all children. Please use pen (not a pencil). Mail or return completed form to: (School/District Information)

STEP 1: List ALL Household Members who are infants, children, and students up to and including grade 12 (if more spaces are required for additional names, attach another sheet of paper).

Definition: A Household Member is "Anyone living with you and shares income and expenses, even if not related." Read *How to Complete the Application for Educational Benefits* for more information. Adults over grade 12 living in the same household should be reported in Step 3. If your children attend different districts or charter/nonpublic schools, return an application at each one.

Child's First Name (list all children in household)	MI	Child's Last Name	School	Grade	Birthdate	Foster Child (v)
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>

STEP 2: Do Any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, MFIP or FDIPIR? Medical assistance does not qualify. If NO > Go to STEP 3.

If YES > Enter SNAP, MFIP or FDIPIR Case Number (between 4-9 digits, do not report EBT card number) _____ then go to STEP 4 (Do not complete STEP 3)

STEP 3: Report Income for ALL Household Members (Skip this step if you answered 'Yes' to STEP 2)

A. Last Four Digits of Social Security Number (SSN) of Adult Household Member: XXX-XX- Or Check if Adult has No SSN: Total Number of All Household Members (Children + Adults)

B. Child Income.
Sometimes children in the household earn or receive income, such as from a part time job or SSI. Please include the TOTAL income received by all children listed in STEP 1. Do not include income received by adults in the box to the right.

Total Income Received by All Children	Weekly	Bi-weekly	2x Month	Monthly
\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. All Adult Household Members (including yourself). For each Household Member listed, if they do receive income, report total gross income only. If they do not receive income from any source, write '0' or leave any fields blank. You are certifying (promising) that there is no income to report. Not sure what income to include here? Flip the page and review "Sources of Income" for information. "Sources of Income" will help you with the Child Income section and All Adult Household Members section.

Names of All Adult Household Members (First and Last)	Weekly	2x Month	Monthly	Report income before deductions or taxes in whole dollars (no cents).
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____

Are you Self-Employed or a Farmer?	Monthly	Yearly	Net income from Farm or Self-Employment. Do not duplicate elsewhere.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____

Any Other Gross Income	Weekly	Bi-Weekly	2x Month	Monthly	Free After Verified	Reduced After Verified	Denied After Verified
SSI, Unemployment, Public Assistance, Child Support, and others on Page 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

STEP 4: Contact information and adult signature. "I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is give in connection with the receipt of Federal funds, and that school officials may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws."

I have checked this box if I do not want my information shared with Minnesota Health Care Program as allowed by state law.

Printed name of adult signing form _____ Daytime Phone _____

Address (if available) _____ Apt# _____ City _____ Zip _____

SIGN HERE: Signature of Household Adult _____ Date _____

Do Not Fill Out: For School Office Use	X52	X26	X24	X12	X1	Verified? Attach Tracker	Free After Verified	Reduced After Verified	Denied After Verified
Conversions to Annualize All Income:	Weekly	Bi-Weekly	2X Month	Monthly	Annualize	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All Total Income (Include child and adult income)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Household Size:	Free	Reduced	Denied
\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Categorical Eligibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Determining Official Signature: _____	Date: _____				Date: _____				
Confirming Official Signature: _____	Date: _____				Date: _____				

OPTIONAL: Children's Racial and Ethnic Identities

We are required to ask for information about your children's race and ethnicity. This information is important and helps to make sure we are fully serving our community. Responding to this section is optional and does not affect your children's eligibility. Respond to both Step One, *Ethnicity* and Step Two, *Race*.

Step One: Ethnicity (check one): Hispanic or Latino Not Hispanic or Latino

Step Two: Race (check one or more): American Indian or Alaskan Native Asian Black or African American Native Hawaiian or Other Pacific Islander White

INSTRUCTIONS: Sources of Income

Sources of Income for Children

Sources of Child Income	Examples
<ul style="list-style-type: none"> Earnings from work Social Security <ol style="list-style-type: none"> Disability Payments Survivor's Benefits Income from person outside the household Income from any other source 	<ul style="list-style-type: none"> A child has a regular full or part-time job where they earn a salary or wages A child is blind or disabled and receives Social Security A Parent is disabled, retired, or deceased, and their child receives Social Security benefits A friend or extended family member regularly gives a child spending money A child receives regular income from a private pension fund, annuity, or trust

Sources of Income for Adults

Earnings from Work	Public Assistance / Alimony / Child Support	All Other Income
<ul style="list-style-type: none"> Salary, wages, cash bonuses (before deductions or taxes) Net income from self-employment (farm or business) If you are in the U.S. Military: <ol style="list-style-type: none"> Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances) Allowances for off-base housing, food and clothing 	<ul style="list-style-type: none"> Cash Assistance from State or local government Supplemental Security Income Unemployment benefits Worker's compensation Alimony payments Child support payments Veteran's benefits Strike benefits 	<ul style="list-style-type: none"> Social Security Disability benefits Regular income from trusts or estates Annuities Investment income Rental income Regular cash payments from outside household

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, 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 household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you 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 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 program rules.

At public school districts, each student's school meal status also is recorded on a statewide computer system used to report student data to MDE as required by state law. MDE uses this information to: (1) Administer state and federal programs, (2) Calculate compensatory revenue for public schools, and (3) Judge the quality of the state's educational program.

Nondiscrimination statement: 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; or
(2) fax: (833) 256-1665 or (202) 690-7442; or
(3) email: program.intake@usda.gov

This institution is an equal opportunity provider.

Does your child have health insurance?

If not, help may be available.

Minnesota Health Care Programs have free and low-cost health insurance for children and families who qualify.

Your child may qualify if your household income is below the following:

Family size	Monthly income	Yearly income
2	\$4,684	\$56,210
3	\$5,917	\$71,005
4	\$7,150	\$85,800
5	\$8,382	\$100,595

Income is one factor for qualifying. Other rules and limits apply. For more information, call your county office or visit <http://mn.gov/dhs/people-we-serve/adults/health-care/>. These income limits are valid until June 30, 2025.

To get a MNsure application for health coverage and help paying costs (DHS-6696):

- Print one from <http://mn.gov/dhs/people-we-serve/adults/health-care/>
- Call 877-KIDS-NOW toll free
- Call

NO ENGLISH



Attention. If you need free help interpreting this document, call the above number.

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