*🡪 INSERT DISTRICT LETTERHEAD 🡨*

Letter to Notify Household of Incomplete Applications

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Dear Parent or Guardian: Date:

Your application for free and reduced price meals or free milk cannot be approved because the application submitted is incomplete. The missing or incorrect information is indicated below:

NJ SNAP (Food Stamp) Number OR TANF Case Number (Step 2)

Child income frequency not indicated (Step 3)

Indicate income using acceptable frequencies (Step 3)

Frequency of income received by each household member (Step 3)

Gross income (net income is not acceptable) (Step 3)

Last four digits of Social Security Number for adult signing the application or if the adult does not have a Social Security Number, check the appropriate box (Step 3)

Adult Signature (Step 4)

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The above information must be provided by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Failure to provide this Information

*(date)*

will result in the application being denied. If you have any questions you may call \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

*(Person) (Phone Number)*

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Determining Official)*

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To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) found online at: <http://www.ascr.usda.gov/complaint_filing_cust.html>, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter 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: (202) 690-7442; or

(3) email: program.intake@usda.gov.

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