

VERIFICATION TRACKER - FOR LOCAL AGENCY USE (Optional)

Name of student or family/household: _____

- ✓ **Attach to each application selected for verification with a copy of all correspondence from household regarding verification and a copy of documents received from the household.**

Date Verification Notice Sent:	
Date Response Due from Household:	
Date Second Notice Sent (or N/A):	
Number of Students on Application:	
Original Approval was:	
<input type="checkbox"/> Free Eligible Based on SNAP/TANF/FDPIR Case Number <input type="checkbox"/> Free Eligible Based on Income/Household Size Information <input type="checkbox"/> Reduced Price Eligible	
Verification Result: Record the calculations and frequency of income on this page.	
<input type="checkbox"/> No Change <input type="checkbox"/> Free Eligible Based on SNAP/TANF/FDPIR Agency Response <input type="checkbox"/> Free Eligible Based on Income/Household Size Information <input type="checkbox"/> Reduced Price Eligible Based on Income/Household Size Information <input type="checkbox"/> Paid Eligible Based on Income/Household Size or SNAP/TANF/FDPIR Agency Response Information <input type="checkbox"/> Paid Eligible as Household Did Not Respond	
Date the Notice of Findings Letter was Sent:	
Date Change Made:	
Date Hearing Requested:	
Hearing Decision/Date:	
Date Verification Completed:	
Verifying Official's Signature:	

Reapplied With Documentation: Record the calculations and frequency of income on this page.

Results of Reapplication:

- Denied Based on Income/Household Size Information
- Free Eligible Based on SNAP/TANF/FDPIR Agency Response
- Free Eligible Based on Income/Household Size Information
- Reduced Price Eligible Based on Income/Household Size Information

Date of Reapproval: _____ Determining Official's Signature: _____