

Jesup Community School District



“High Expectations, High Achievement”

July 2024

Superintendent's Office

Chad Kohagen
ckohagen@jesup.k12.ia.us

High School Office

Paul Rea, Principal
prea@jesup.k12.ia.us

Middle School Office

Gina Feldt, Principal
gfeldt@jesup.k12.ia.us

Special Education Office

Sadie Terpstra, Director
sterpstra@jesup.k12.ia.us

Elementary Office

Brian Pottebaum, Principal
bpottebaum@jesup.k12.ia.us

Athletic Office

Joe Smeins, A.D.
jsmeins@jesup.k12.ia.us

Community Rec Director

Brock Sabers
bsabers@jesup.k12.ia.us

Business Office

Sherry Kilby
skilby@jesup.k12.ia.us

Additional Connections

319.827.1700

Bus Garage Ext. 1411

Fax: 319.827.3905

Website: www.jesup.k12.ia.us

531 Prospect St.
PO Box 287
Jesup, IA 50648

Parents,

Registration for new and existing students will be open on August 1st, 2024.

Please go directly to your your parent portal, click on 'More' from the left side menu, then 'Online Registration' (again it will not be open until August 1st).

Please pay the registration fees in your portal at the time you register. (\$2 service fee is removed for the month of August)

If you need more assistance, please email your building secretary:

- Elementary: Heather Hansen hhansen@jesup.k12.ia.us
- Middle School: Kayla Bresson kbresson@jesup.k12.ia.us
- High School: Sheila Even sheven@jesup.k12.ia.us

For 3 and 4 year old Preschool registration contact Heather Hansen. She may have already enrolled your student. New students can be entered from the school website. (Home page under Popular Links, click on Registration)

You must be signed in on your Parent Portal through Infinite Campus to complete your registration, to look at your student's schedules (if available) and to pay your registration fees online. If you do not have a Parent Portal please send an email to your building secretary and request one.

If you have any additional questions, please email me at mknipp@jesup.k12.ia.us

You can also find COMPLETE REGISTRATION DIRECTIONS and all forms on the school website under 'District', 'Looking to Enroll'

Thank you and see you all soon ;)

NEW FAMILIES CAN USE
THIS QR CODE TO GET
TO REGISTRATION



Facebook: <https://www.facebook.com/JesupSchools/>

Instagram: <https://www.instagram.com/jesupschools/>

Twitter: <https://twitter.com/jesupschools>

Important information in this newsletter

- ❖ Registration form K-12 (for price information only please register online if possible)
- ❖ Registration Early Learning
- ❖ Student Supplies Elem, MS and HS
- ❖ Health requirements by Grade Level
- ❖ Information about Free and Reduced School Meals , Instructions , and the Application. Do NOT fill out if you are Directly Certified already.
- ❖ How to apply for HHS Benefits
- ❖ Back Pack/ Weekend Snacks Program

Booster Event: J-Hawk Nation!!

Assemble those golf teams and get registered for this year's event. Please try to register before July 30th; we need to give the golf course some information by the end of the month. We look forward to another fun day on the course.

The Jesup Booster Club is hosting its second annual golf outing on Saturday, August 31st, 2024 at the Jesup Golf and Country Club. Golfing will begin with a shotgun start at 10:00 am. The cost is \$50 per golfer or \$200 per foursome. There will be auction items available to bid on leading up to and on the day of the event. If you are interested in helping the day of the event but don't want to golf, don't hesitate to get in touch with Ricky Nolan at 319-290-4263. It's always a great day to be a J-Hawk! We look forward to seeing you on the course.

BE a part of THE LEGACY!!

Ricky Nolan, President Jesup Booster Club

School
Supplies
resource. >>>

We also have
Jay's Closet
for a limited
amount of
supplies



JESUP COMMUNITY SCHOOL DISTRICT

2024 - 2025 Registration Form

(One form per student)

Educational Materials Fees

Enter \$Amount

K - 4 (Includes Textbooks & Technology)

\$80.00

5 - 12 (Includes Textbooks & Technology)

\$100.00

Breakfast/Lunch Account

Daily Prices

Lunch

Preschool-4 - \$2.85

5-12 - \$2.95

Adult - \$4.85

Breakfast

All Students \$2.00

Adults - \$2.50

Extra Meal Milk \$.50

(All meal deposits are placed in a Family Account)

Initial Deposit

Grades K-2 Classroom Snack Milk Fee
(Optional Participation)

\$45.00/Semester \$90.00/Year

Activity Ticket

Student Pass (Includes Summer of 2025)

grades TK-4 \$30 grades 5-12 \$60.00

Adult Booklet (20 Tickets)

\$100.00

HS games admission: \$7.00(adults and students)/ MS games admission: \$3.00 (adults only)

Miscellaneous

9 - 12 Yearbook

(2024-2025)

\$45.00

Yearbook Personalization

\$7.00

Padlocks (Only locks purchased from school may be used on lockers)

\$6.00

Drivers Ed classes please contact: mtmdrivingschool@gmail.com in Independence.

Student's Name _____ Grade _____

Parent/Guardian Name _____ TOTAL PAID \$ _____

Paid by: Cash _____

Check# _____

Date: _____

Parent Portal _____

Check Name _____

*for office use only

JESUP COMMUNITY SCHOOL DISTRICT

2024- 2025 Registration Form

(One form per student)

Early Learning Fees

Enter \$ Amount

3yr old Preschool Tuition - Paid the 1st of Each Month

3 Day program \$195.00/month (Aug. fee is \$45.00) _____

5 Day Program \$325.00/month (Aug. fee is \$80.00) _____

4yr old Preschool Tuition - Paid the 1st of Each Month

Half day session Free _____

4yr old Wrap (full day) session \$375.00/month (Aug. fee is \$90.00) _____

Breakfast/Lunch Account

Daily Prices

Lunch - **Preschool-4** \$2.85 **5-12** \$2.95 **Adult** \$4.85

Breakfast - **All Students** \$2.00 **Adults** \$2.50

Extra Meal Milk \$0.50

(All meal deposits are placed in a Family Account) Initial Deposit _____

3 Year Old Extended Day Program

3 Day Option \$165.00/month (Aug fee is \$40.00) _____

5 Day Option \$265.00/month (Aug. fee is \$65.00) _____

Before School Program (per month) \$ 70.00/first child _____

\$ 55.00 each additional child _____

After School Program (per month) \$125.00/first child _____

\$95.00 each additional child _____

\$80.00 daily pick up by 4:30 _____

Full Days (Non-School Days) (per day) \$30.00 first child/\$26.00 each additional child

Student's Name _____ Grade _____

Parent/Guardian Name _____ TOTAL PAID \$ _____

Paid by: Cash _____ Check# _____ Date _____

Check Name _____

Jesup Community School Elementary Supply List 2024-2025

Extended Day
2 containers disinfecting wipes-recommended
1 box of washable markers
1 box of 24 count crayons
1 package dry erase (Expo) markers
2 boxes of Kleenex-recommended
1 package of cardstock white or colored
4-pack of Play-Doh
Rest Mat, blanket & towel
Reusable grocery bag (to hold rest items)
Change of clothes including underwear & socks (seasonal) in large Ziploc bag with name on it.

TK
NO BACKPACKS WITH WHEELS
4 boxes of 24- count crayons
4 Boxes of PRIMARY washable markers (no thin tips)
1 pair of scissors
1 PLAIN plastic folder
1 1inch 3 ring Binder
1 spiral notebook
8 glue sticks
2 bottles of Elmer's glue
10 #2 lead pencils
1 large pink eraser
4 dry erase markers
4 pack of play dough
1 box of Ziploc type bags (gallon or quart size)
Resting mat
2 boxes of Kleenexes
2 large container of disinfecting wipes
1 box of Ziploc type bag (gallon or quart size) with slide closure
Change of clothes including underwear & socks (seasonal) in a large Ziploc bag with name on it.

1st Grade
NO BACKPACKS WITH WHEELS
#2 lead Ticonderoga pencils - 12 pack
2 boxes of 24 Crayola crayons
Spiral bound white 3x5 index cards
4 glue sticks
1 School supply box or pencil box
1 Scissors
2 large pink erasers
3 plastic folders (no prongs)
1 plastic folder (3 prongs)
4 wide-ruled spiral notebooks
2 boxes of markers
4 dry erase Expo markers
2 boxes of colored pencils
2 boxes of Kleenex-recommended
2 containers of disinfecting wipes

3 Yr Old Preschool
NO BACKPACKS WITH WHEELS
Backpack large enough to store pocket folder without bending
2 containers disinfecting wipes-recommended
1 box of 24-count crayons
2 glue sticks
2 boxes of Kleenex- recommended
4 pack of Play Doh
1 plastic 2-pocket folder
2 boxes of primary washable markers
1 package of dry erase markers
1 bottle of glue
Rest mat, blanket & towel (PM Class Only)
Reusable grocery bag for rest items (PM Class Only)
Change of clothes including shirt, pants/shorts, underwear & socks in a large Ziploc bag labeled with student's name

2nd Grade
NO BACKPACKS WITH WHEELS
1 box of crayons
1 box of colored pencils
2 boxes of washable markers
1 pair of scissors
1 plastic pencil box or case
2 wide-ruled spiral notebooks
2 plastic folders WITH prongs
2 plastic folders (no prongs)
8 dry erase Expo markers
24 - #2 plain lead pencils
2 glue sticks
1 pump container of hand sanitizer
1 box of slider Ziploc baggies (quart or gallon size)
2 containers of disinfecting wipes
2 large boxes of Kleenex

4 Yr Old PK
NO BACKPACKS WITH WHEELS
Backpack- large enough to store pocket folder without bending
2 boxes of Kleenex
3 boxes of 24-count crayons
4 boxes of washable markers
1 pair of scissors (blunt tip)
4 dry erase markers
3 bottles of glue
2 plastic folders
2 spiral notebooks
1 box of quart size, slider Ziploc bags
2 containers disinfecting wipes
4 pack of play dough
Resting mat
Change of clothes (shirt, shorts, underwear & socks)

3rd Grade
NO BACKPACKS WITH WHEELS
48 - #2 lead plain pencils
2 big erasers
1 pack classic markers
1 pack of crayons or color pencils
1 SMALL pencil box or case
1 pair scissors
2 LARGE boxes of Kleenex
1 - 6 pack Expo dry erase markers
1 spiral notebook – wide-lined
4 glue sticks
1 pump container of hand sanitizer
2 containers of disinfecting wipes
2 plastic folders
1 ruler with inches and centimeters
1 - 1 inch binder
1 pack of loose leaf-paper - wide-lined

Kindergarten
NO BACKPACKS WITH WHEELS
4 boxes of 24-count crayons
4 boxes of PRIMARY washable markers (not thin tips)
1 pair of scissors
1 PLAIN plastic folder
2 spiral notebooks
8 glue sticks
1 bottle of Elmer's glue
16 #2 lead pencils
1 large pink eraser
6 dry erase markers
4 pack of play dough
Towel for rest time-no mats
1 bottle of Hand Sanitizer
2 large containers of disinfecting wipes
2 boxes of Kleenex

4th Grade
NO BACKPACKS WITH WHEELS
1 pair scissors
4 plain colored plastic folders (no prongs)
48 #2 lead pencils (no mechanical pencils)
8 dry erase markers
2 large boxes of Kleenex-recommended
2 spiral notebooks- wide-lined
1 school supply box or pencil box
1 composition notebook
1 box of 8-10 count markers
1 ruler with inches and centimeters
Ziploc bags any size
1 24-count colored pencils
2 containers of disinfecting wipes-recommended
4 glue sticks
25 pencil top erasers

Please contact the school if you need assistance acquiring any school supplies.



Jesup Community School Grades 5-8 Supply List 2024-2025

5th Grade Supplies		6th Grade Supplies		7th Grade Supplies		8th Grade Supplies	
Recommended	Disinfecting Wipes (Clorox or Lysol)	*Recommended*	Disinfecting Wipes (Clorox or Lysol)	*Recommended*	Disinfecting Wipes (Clorox or Lysol)	*Recommended*	Disinfecting Wipes (Clorox or Lysol)
	Kleenex		Kleenex		Kleenex		Kleenex
General	Pencils	General	Pencils and sharpener (no mechanical)	General	Pencils	General	Pencils
	Pencil box or 3- holed pencil pouch		Scissors		Scissors		Scissors
	Scissors		Colored pencils (or twistables)		Colored pencils (or twistables)		colored pencils (or twistables)
	Colored pencils		Washable markers		Washable markers		1- 4 pack fine tip dry erase markers
	Washable markers		Pens		Pens		Washable markers
	3 glue sticks		4 fine tip dry erase markers		4 fine tip dry erase markers		Pens
	Headphone's that plug into AUD jack on Chromebook		2 Glue Stick		2 Glue Stick		2- Glue Stick
Guidance	1 spiral notebook		Headphone's that plug into AUD jack on Chromebook		Headphone's that plug into AUD jack on Chromebook		Headphone's that plug into AUD jack on Chromebook
PE clothes	Tennis shoes (bottoms clean)	PE clothes	Tennis shoes (clean on bottom)	PE clothes	Tennis shoes (clean on bottom)	PE clothes	Tennis shoes (clean on bottom)
	Shorts		Deodorant		Deodorant		Deodorant
	T-shirts		Shorts		Shorts		Shorts
	Sweats for cold weather		T-shirts		T-shirts		T-shirts
	Deodorant		Sweats for cold weather		Sweats for cold weather		Sweats for cold weather
	NO aerosol body sprays!	Social Studies	Jumbo book cover - must cover 11" book or larger	Social Studies	Jumbo book cover - must cover 11" book or larger	Social Studies	1 pkg Loose Leaf Paper OR single subject notebook
	Towel and hygiene kit for shower		1 2" 3-ring binder w/pockets & cover pocket		2" 3-ring binder w/pockets & cover pocket		1 pkg (100 ct) WHITE lined notecards
Social Studies	1 blue notebook	Math	2" binder	Math	2" binder		XL book cover - must cover 11" book or larger
	1 blue folder		3 subject notebook		3 subject notebook		2" 3-ring binder w/pockets & cover pocket
	1 pkgs. 3X5 notecards		Texas Instrument Calculator- 30XIIS *Recommended*		Texas Instrument Calculator- 30XIIS *Recommended*		Zipper pouch with binder holes *Recommended*
	3 hole pencil pouch with zipper	Science	1 Single subject notebook	Science	Notebook (single subject)		Highlighters (3 diff. colors)
Math	1 red folder		1 1" binder with pockets		1 12 count colored pencils	Math	1" binder
	1 red notebook		2 Glue Sticks		1 10 count colored markers		Texas Instrument Calculator- 30XIIS *Recommended*
	2 pkg dry erase markers		12 ct color pencil		2 glue sticks		1 subject notebook
	1 pkg 3x5 note cards		10 ct markers	Language Arts	Composition Notebook	Science	Notebook (single subject)
	Texas Instrument Calculator- 30XIIS *Recommended*	Language Arts	1 1.5" binder		Post-It Notes (1 pkg)		1 12 count colored pencils
Language Arts	1 purple folder		5 tab - 3 ring page dividers		1 pkgs 3x5 Notecards		1 10 count colored markers
	1 purple notebook		1 Composition Notebook		1 pkg Looseleaf paper		2 glue sticks
Science	1 green notebook	Literacy	1 folder	Literacy	1.5" - 3 ring binder w/ pockets	Language Arts	Composition Notebook (No Spiral)
	1 1.5"-2" binder		1 1.5" - 3 ring binder w/ pockets		6-tabbed 3-ring page dividers		1 100 pk 4 x 6 index cards
	1 green folder		6- tabbed 3-ring paged dividers		1 notebook (single subject)		1" clearview binder
Literacy	1 yellow notebook		1 notebook (single subject)		1 folder		1 pkg Looseleaf paper, college rule
	1 yellow folder	Health	1 notebook (single subject)	FCS	1 yellow folder		1 pkg 3x3 post-it notes (100 count)
Special Ed Students	2 inch white binder with plastic front cover	Guidance	1 Spiral Notebook	Algebra	Texas Instrument Calculator- 30XIIS	Literacy	Single Subject Notebook
Technology	2 pocket folder			Guidance	Single Subject Notebook		Notecards (1 pkg of 3x5)
				Gateway	Single Subject Notebook		Post-It Notes (1 pkg)
							2 Pocket Folder
						AG	Single Subject Notebook
							1 Folder
							1 pack of Notecards
						Algebra 1	Graph Paper
							Book Cover
							Texas Instrument Calculator- 30XIIS *Recommended*
						Guidance	Single Subject Notebook

Jesup Community School Grades 9-12 Supply List 2024-2025

Please contact Jay's Closet if you need any assistance purchasing school supplies.

General Supplies		Ag Supplies		Math Supplies		Art supplies	
All students	Pens	All students	Folder-preferably plastic	Algebra I	Graph paper	Art 2,3,&4	sketchbooks
	Pencils	Band Supplies			TI-30XS calculator or better*		paintbrushes
	Colored pencils		Band instrument (or rented through school)	Geometry	Compass	Graphic Design	32 GB SD card
	Dry erase marker		Flip folder and lyre		TI-30XS calculator or better*		
	Notebooks/Notebooks		Nice dress clothes/shoes for concerts		Protractor (smaller is better)		
	Composition notebook	CAD Supplies		All other Math classes	TI-83 or TI84 (or better) graphing calculator*		
	9th graders usb flash drive for computer literacy		Flash Drive	Metals Supplies			
	1" 3-ring binder w/pockets & cover pocket (3 or 4 depending on classes)	Choir Supplies			Leather gloves or welding gloves		
	2" 3-ring binder w/pockets & cover pocket (3 or 4 depending on classes)		All black dress shoes (no slippers, must be closed toe), black slacks (no jeans), black socks		Z87 safety glasses		
	Zipper pouch w/ 3 binder holes				2 Black Sharpie Markers		
	Scissors	Clothing Supplies		PE Supplies			
	Highlighters	I & II	Fat Quarters	All students:	Athletic shoes		
	Basic calculator		Interfacing & Zipper		Change of clothes		
Homeroom Supplies (These supplies are not required, but greatly appreciated)			Thread		Deodorant		
All students	3 boxes facial tissues		Fabric (by projects)	Photography Supplies			
	2 containers disinfecting wipes	Industrial Tech Supplies			32 GB SD card (Digital SLR camera recommended)		
			Mechanical Pencils	Science Supplies			
*	*Any item marked with an astrick is recommended, but the district will provide if the student does not have this supply*		Old Shirt	Science I	Basic calculator*		
			Pink Erasers	Physics	Protractor		
			Permanent Markers		Scientific calculator (TI-30XS)*		
			Z87 Safety Glasses	Chemistry	Scientific calculator (TI-30XS)*		
	Business Computer Application (All Freshmen)	Intro to Residential Supplies		All other Science classes	Colored pencils		
	Flash Drive		3 carpenters pencils		calculator		
			25 foot tape measure		dry erase marker		
			16 oz hammer				
			speed square				

NOTES for the 2024/2025 School year

HEALTH REQUIREMENTS BY GRADE LEVEL ** Please note these must be submitted prior to the first day of school. ** See the link for further details. https://educate.iowa.gov/pk-12/student-services/specialized-support/health/requirements	
Preschool	<input type="checkbox"/> Certificate of Immunizations <input type="checkbox"/> Physical Exam – within last 365 days <input type="checkbox"/> Dental Screening - only if enrolled in head start
Pre-K	<input type="checkbox"/> Certificate of Immunizations <input type="checkbox"/> Physical Exam – within last 365 days <input type="checkbox"/> Dental Screening - only if enrolled in head start
TK and Kindergarten	<input type="checkbox"/> Updated Immunizations for Kindergarten <input type="checkbox"/> Physical Exam – within last 365 days <input type="checkbox"/> Dental Screening - Valid from any screening after age 3. <input type="checkbox"/> Vision Screening - valid 1 year prior to enrollment. May be done by family doctor with physical exam or at eye doctor. Lions Club will screen kids at school if consent is signed. <input type="checkbox"/> Lead Screening - call your provider to ensure this has been done, no need to submit results.
3rd Grade	<input type="checkbox"/> Vision Screening – can be done by eye dr, family dr, or school nurse
7th Grade	<input type="checkbox"/> Updated Immunizations – must have an updated Tdap vaccine and must include 1 st dose Meningococcal (A,C,W,Y) Vaccine <u>prior to starting 7th grade</u>
9th Grade	<input type="checkbox"/> Dental Screening or Exemption – must be done at dentist or dental hygienist. Valid 1 year prior to enrollment.
12th Grade	<input type="checkbox"/> Updated Immunizations – must have 2 doses of meningococcal (A,C,W,Y) Vaccine OR 1 dose if received when student was 16 years of age or older.

PARENT/GUARDIAN INFORMATION LETTER FOR FREE AND REDUCED PRICE SCHOOL MEAL APPLICATION

Frequently Asked Questions About Free and Reduced Price School Meals

Dear Parent/Guardian:

Children need healthy meals to learn. **Jesup Comm. Schools** offers healthy meals every school day. Breakfast costs **\$2.00**; lunch costs \$2.85/2.95. Your children may qualify for free meals/milk or for reduced price meals. Reduced price is **\$.30** for breakfast and **\$.40** for lunch. Return or mail the completed application to: **Jesup Comm.School Attn. Admin Office/FR application, PO Box 287, Jesup, IA 50648.**

Below are some common questions and answers to help you with the application process.

1. WHO CAN GET FREE OR REDUCED PRICE MEALS?

- All children in households receiving benefits from the Supplemental Nutrition Assistance Program (SNAP), the Family Investment Program (FIP) or a few specific Medicaid programs are eligible for free or reduced price meals.
- Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals.
- Children participating in their school's Head Start program are eligible for free meals.
- Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
- Children may receive free or reduced price meals if your household's income is at or below the limits on the Federal Income Eligibility Guidelines below and submit an application for free and reduced price meals/milk.

FEDERAL INCOME ELIGIBILITY GUIDELINES for SCHOOL YEAR 2024-2025

Household Size	Yearly	Monthly	Twice per Month	Every Two Weeks	Weekly
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
Each additional family member:	9,953	830	415	383	192

2. SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE OR REDUCED PRICE MEALS? No, but please read the letter carefully and follow the instructions. If any children in your household were missing from your notification, contact: Margie Knipp at mknipp@jesup.k12.ia.us or 319-827-1700 immediately as eligibility for free or reduced price meals is extended to all school age children in a household. If you did not receive a letter from the school, but received a Free Lunch Notice from the Iowa Department of Health and Human Services (Iowa HHS), submit this letter to your children's school. You may add any students living in your household who are not listed on the letter. Also, if someone in your household receives SNAP or FIP benefits and you did not receive either of these letters, you may complete an application listing the case number as this will qualify all school age children in your household for free meals. If you were informed that your children will get reduced price meals, see the income guidelines above and if you feel you would qualify for free meal benefits, complete an application for free and reduced price meals.
3. WHAT IF WE HAVE FOSTER CHILDREN? Households with foster and non-foster children may choose to include the foster child as a household member, as this may help other children in the household qualify for benefits. If the foster family is not eligible for free or reduced price meal benefits, that does not prevent a foster child from receiving free meal benefits.
4. HOW DO I KNOW IF MY CHILDREN QUALIFY AS HOMELESS, MIGRANT OR RUNAWAY? Do the members of your household lack a permanent address? Are you staying together in a shelter, hotel, or other temporary housing arrangement? Does your family relocate on a seasonal basis? Are any children living with you who have chosen to leave their prior family or household? If you believe children in your household meet these descriptions and haven't been told your children will get free meals, please contact: Jesup Comm.School, homeless liaison, at bpottbauer@jesup.k12.ia.us or 319-827-1700 ext 1102.

5. DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD? No, complete the applications for free and reduced price school meals for all the students in your household. We cannot approve an application unless complete eligibility information is submitted, so be sure to complete all required information.
6. MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT A NEW ONE? Yes, your child's application is only good for that school year and for the first few days of this school year, through **October 4th, 2024**. You must complete a new application unless the school told you that your child is eligible for the new school year. When the carryover period ends, unless you are notified that your children will receive free meals or you submit an application that is approved, the children must pay full price for school meals. The school is not required to send a reminder or a notice of expired eligibility.
7. I GET WIC. CAN MY CHILDREN GET FREE MEALS? Children in households participating in WIC may be eligible for free or reduced price meals. Please complete and send in an application.
8. MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN? Yes, you, your children or other household members do not have to be U.S. citizens to apply for free or reduced price meals.
9. WILL THE INFORMATION I GIVE BE CHECKED? Yes, we may also ask you to send written proof of the household income you report. You are not required to provide proof with your application.
10. IF I DON'T QUALIFY NOW, MAY I APPLY LATER? Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free or reduced price meals if the household income drops below the income limit, if your household size goes up, or if you start getting SNAP, FIP or other benefits.
11. WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION? You should talk to your school officials. You also may ask for a hearing by calling or writing to: **Chad Kohagen, Superintendent, PO Box 287 Jesup, IA 50648, ckohagen@jesup.k12.ia.us or 319-827-1700.**
12. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you normally receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
13. WHAT IF SOME HOUSEHOLD MEMBERS HAVE NO INCOME TO REPORT? Household members may not receive the types of income we ask you to report on the application, or may not receive income at all. Whenever this happens, please write a 0 in the field. However, if any income fields are left empty or blank, those will also be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you meant to do so.
14. WE ARE IN THE MILITARY. DO WE REPORT OUR INCOME DIFFERENTLY? Your basic pay and cash bonuses must be reported as income. If you get any cash value allowances for off-base housing, food or clothing, or receive Family Subsistence Supplemental Allowance payments, it must also be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. Any additional combat pay resulting from deployment is also excluded from income.
15. DO I NEED TO PROVIDE MY SOCIAL SECURITY NUMBER? Only the last four digits of the Social Security Number of the household's primary wage earner or another adult household member (or an indication of "none") is needed.
16. WHAT IF THERE ISN'T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY? List any additional household members on a Supplemental Worksheet and attach it to your application. Contact **Margie Knipp at mknipp@jesup.k12.ia.us or 319-827-1700** to receive a Supplemental Worksheet.
17. WHO CAN GET FREE MILK? If your school participates in the Special Milk Program for half day kindergarteners, your kindergarten child may be eligible for free milk. Children who buy extra milk with a meal or if they eat breakfast or lunch and have an afternoon milk break, are not eligible to receive free milk.
18. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for SNAP or other assistance benefits, contact your local assistance office or call **1-877-347-5678**. Your children may be eligible for Hawki (children's health insurance) or a waiver of school fees. Read the information on the back of the Application for Hawki information. A school waiver form is available from your school.

19. CAN CHILDREN WITH DISABILITIES GET FOOD SUBSTITUTIONS? If a child has a disability, as determined by a licensed medical professional, and the disability prevents the child from eating the regular school meal, the school will make substitutions prescribed by the licensed medical professional. If a substitution is needed, there will be no extra charge for the meal. Please note, however, that the school is not required to make a substitution for a food allergy, unless it meets the definition of disability. Please call the school for further information.
20. DO I NEED TO REPORT MY RACE AND ETHNICITY? It is optional to complete the racial/ethnic portion of the application.
21. Translated applications are available at: <http://www.fns.usda.gov/school-meals/translated-applications>.

If you have other questions or need help, call **319-827-1700** or mknipp@jesup.k12.ia.us

Sincerely,

Margie Knipp

Admin Office

USDA 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.

Iowa Non-Discrimination Statement: "It is the policy of this CNP provider not to discriminate on the basis of race, creed, color, sex, sexual orientation, gender identity, national origin, disability, age, or religion in its programs, activities, or employment practices as required by the Iowa Code section 216.6, 216.7, and 216.9. If you have questions or grievances related to compliance with this policy by this CNP Provider, please contact the Iowa Civil Rights Commission, Grimes State Office building, 6200 Park Ave Suite 100, Des Moines, IA 50321-1270; phone number 515- 281-4121, 800-457-4416; website: <https://icrc.iowa.gov/>."

Information Statement

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 submit all needed information, 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 social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Family Investment Program (FIP) 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 programs rules.

HOW TO APPLY FOR FREE AND REDUCED PRICE SCHOOL MEALS/MILK

Please use these instructions to help you fill out the application for free or reduced price school meals/milk. You only need to submit **one** application per household, even if your children attend more than one school in **Jesup Comm. School District**. Please follow these instructions in order. Each step of the instructions is the same as the steps on your application. The application must be filled out completely to certify your children for free or reduced price school meals. **Completed applications should be mailed or returned to Jesup Comm. School, attn:F/R Meals Application, PO Box 287, Jesup, IA 50648.** If at any time you are not sure what to do next, please contact **Jesup Comm. School, Margie Knipp 319-827-1700 ext1401 mknipp@jesup.k12.ia.us**

PLEASE USE A PEN (NOT A PENCIL) WHEN FILLING OUT THE APPLICATION AND DO YOUR BEST TO PRINT CLEARLY.

STEP 1: LIST ALL HOUSEHOLD MEMBERS WHO ARE INFANTS, CHILDREN AND STUDENTS UP TO AND INCLUDING GRADE 12.

Who should I list here? When filling out this section, please include all members in your household who are:

- Children age 18 or under **and** are supported with the household's income;
- In your care under a foster arrangement or qualify as homeless, migrant or runaway youth;
- Students attending **Jesup Comm. School**, *regardless of age*.

Tell us how many infants, children and school students live in your household. They do NOT have to be related to you to be a part of your household.

- A) List each child's name and date of birth.** Print each child's first name, middle initial, last name and date of birth (optional). Use one line of the application for each child. If there are more children present than lines on the application, attach a Supplemental Worksheet, which can be obtained from the school, with all required information for the additional children.
- B) Is the child a student?** Mark 'Yes' or 'No' under the column titled "student" to tell us which children attend Jesup Comm. Schools. If you marked 'Yes' write where the child attends school and write the grade level of the student in the "Grade" column to the right.
- C) Do you have any foster children?** If any children listed are foster children, mark the "Foster Child" box next to the child's name. If you are *ONLY* applying for foster children, after finishing STEP 1, go to "STEP 4". Foster children who live with you may count as members of your household and should be listed on your application. If you are applying for both foster and non-foster children, go to step 3.
- D) Are any children homeless, migrant or runaway?** If you believe any child listed in this section may meet this description, mark the "Homeless, Migrant, Runaway" box next to the child's name and **complete all steps of the application.**
- E) Share children's racial and ethnic identities (optional).** Next to each child's name, we ask you to share information about your children's race and ethnicity. This field is optional and does not affect your children's eligibility for free or reduced price school meals.
- If 'NO', go to **STEP 3. (Leave the rest of STEP 2 blank)**
 - If 'YES,' provide a case number for **SNAP, FIP, or FDPIR.** You only need to write **one** case number. Case numbers are located on your Notice of Decision. **Go to STEP 4.**

STEP 2: DO ANY HOUSEHOLD MEMBERS CURRENTLY PARTICIPATE IN the Supplemental Nutrition Assistance Program (SNAP), Family Investment Program (FIP) OR FDPIR?

If anyone in your household (including you) currently participates in one or more of the assistance programs listed below, your children are eligible for free school meals:

- The Supplemental Nutrition Assistance Program (SNAP-formerly Food Assistance in Iowa)
- The Family Investment Program (FIP)
- The Food Distribution Program on Indian Reservations (FDPIR)

STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS

Report all amounts in GROSS INCOME ONLY. Report all income in whole dollars. Do not include cents. Gross income is the total income received before taxes.

Many people think of income as the amount they “take home” and not the total, “gross” amount. Make sure that the income you report on this application has NOT been reduced to pay for taxes, insurance premiums or any other amounts taken from your pay.

Write a “0” in any fields where there is no income to report. Any income fields left empty or blank will also be counted as a zero. If you write ‘0’ or leave any fields blank, you are certifying (promising) that there is no income to report. If local officials have known or available information that your household income was reported incorrectly, your application will be investigated.

- A) Report total household size.** Enter the total number of household members in the field “Total Household Members (Children and Adults).” This number **MUST** be equal to the number of household members listed in STEP 1 and STEP 3. If there are any members of your household that you have not listed on the application, go back and add them. It is very important to list all household members, as the size of your household affects your eligibility for free and reduced price meals.
- B) Provide the last four digits of your Social Security Number.** An adult household member must enter the last four digits of their Social Security Number in the space provided.
- C) You are eligible to apply for benefits even if you do not have a Social Security Number.** If no adult household members have a Social security Number, leave this space blank and mark the box to the right labeled “Check if no SSN.”

FOR EACH ADULT HOUSEHOLD MEMBER:

- D) List all adult household member’s name.** Print the name of each household member in the boxes marked “Names of Adult Household Members (First and Last).” **Do not list any household members you listed in STEP 1.**

Who should I list here?

When filling out this section, please include **all** adult members in your household who are:

- Living with you and share income and expenses, even if not related and even if they do not receive income of their own.

Do not include:

- People who live with you but are not supported by your household’s income AND do not contribute income to your household.
- Children and students already listed in Step 1.

Report earnings from work. Refer to the chart below titled “Sources of Income for Adults” and report all income from work in the “Earnings from Work” field on the application. This is usually the money received from working at jobs. If you are self-employed or farm owner, you will report your net income. If you need assistance with this, ask your children’s school for the Supplemental Worksheet which has self-employment calculations.

What if I am self-employed?

If you are self-employed, report income from work as a **net** amount. This is calculated by subtracting the total operating expenses of your business from its gross receipts and revenue. Ask your school for a Supplemental Worksheet to assist you in determining your monthly gross annual income before deductions.

Report income from public assistance/child support/alimony. Refer to the chart below titled “Sources of Income for Adults” and report all income that applies in the “Public Assistance/Child Support/Alimony” field on the application. Do not report the value of any cash value public assistance benefits NOT listed on the chart. If

income is received from child support or alimony, only report court-ordered payments. Informal but regular payments should be reported as “other” income in the next part.

Report income from pensions/retirement/all other income. Refer to Table 2 below titled “Sources of Income for Adults” and report all income that applies in the “Pensions/Retirement/All Other Income” field on the application.

Table 1. Sources of Income for Adults

Earnings from Work	Public Assistance/ Alimony/Child Support	Pensions/Retirement/All Other Income
<ul style="list-style-type: none"> ● Salary, wages, cash bonuses ● Net income from self-employment (farm or business) <p>If you are in the U.S. Military:</p> <ul style="list-style-type: none"> ● Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances) <p>Allowances for off-base housing, food and clothing</p>	<ul style="list-style-type: none"> ● Unemployment benefits ● Worker’s compensation ● Supplemental Security Income (SSI) ● Cash assistance from State or local government ● Alimony payments ● Child support payments ● Veteran’s benefits ● Strike benefits 	<ul style="list-style-type: none"> ● Social Security (including railroad retirement and black lung benefits) ● Private Pensions or disability benefits ● Regular Income from trusts or estates ● Annuities ● Investment Income ● Earned interest ● Rental income ● Regular cash payments from outside household

E) Report all income earned or received by children. Refer to the table below titled “Sources of Income for Children” and report the combined gross income for ALL children listed in Step 1 in your household in the box marked “Child Income.” Only count foster children’s income if you are applying for them with the rest of your household (income from a part-time job or from any funds provided to the child for the child’s personal use). It is optional for the household to list foster children living with them as part of the household on an application for non-foster children.

What is Child Income?
 Child income is money received from outside your household that is paid **directly** to your children. Many households do not have any child income. Use the chart below to determine if your household has child income to report.

Table 2. Sources of Income for Children

Sources of Child Income	Example(s)
<ul style="list-style-type: none"> ● Earnings from work 	<ul style="list-style-type: none"> ● A child has a regular full or part-time job where they earn a salary or wages. (Infrequent earnings, such as income from occasional babysitting or lawn mowing, are not counted as income.)
<ul style="list-style-type: none"> ● Social Security <ul style="list-style-type: none"> ○ Disability Payments ○ Survivor’s Benefits 	<ul style="list-style-type: none"> ● A child is blind or disabled and receives Social Security benefits. ● A parent is disabled, retired, or deceased, and their child receives social security benefits.
<ul style="list-style-type: none"> ● Income from person <i>outside</i> the household 	<ul style="list-style-type: none"> ● A friend or extended family member <i>regularly</i> gives a child spending money.
<ul style="list-style-type: none"> ● Income from any other source 	<ul style="list-style-type: none"> ● A child receives regular income from a private pension fund, annuity, or trust.

STEP 4: CONTACT INFORMATION AND ADULT SIGNATURE

All applications must be signed by an adult member of the household. By signing the application, that household member is promising that all information has been truthfully and completely reported. **Before completing this section, please also make sure you have read the privacy and civil rights statements on the back of the application.**

- A) Provide your contact information.** Write your current address in the fields provided if this information is available. **If you have no permanent address, this does not make your children ineligible for free or reduced price school meals.** Sharing a phone number, email address, or both is optional, but helps us reach you quickly if we need to contact you.
- B) Print and sign your name and write today's date.** Print the name of the adult signing the application and sign in the box labeled "Signature of adult completing the form."
- C) Mail or return completed form to: Jesup Comm. School, Attn. F/R Meals Application, PO Box 287, Jesup IA 50648. Please do not mail completed form to the Department of Agriculture as this will delay processing.**
- D) Decline having your information released to Hawki.** If you do not want your household information shared with Hawki, **print, sign and date in the box provided.**
- E) Obtaining translated applications.** If you need a translated application with instructions, they can be found in 49 languages at: <https://www.fns.usda.gov/school-meals/translated-applications>.

USDA Nondiscrimination Statement:

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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

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Iowa Non-Discrimination Statement: "It is the policy of this CNP provider not to discriminate on the basis of race, creed, color, sex, sexual orientation, gender identity, national origin, disability, age, or religion in its programs, activities, or employment practices as required by the Iowa Code section 216.6, 216.7, and 216.9. If you have questions or grievances related to compliance with this policy by this CNP Provider, please contact the Iowa Civil Rights Commission, Grimes State Office building, 6200 Park Ave Suite 100, Des Moines, IA 50321-1270; phone number 515- 281-4121, 800-457-4416; website: <https://icrc.iowa.gov/>."

2024-2025 Iowa Application for Free and Reduced Price School Meals/Milk Complete one application per household. Use a pen (not a pencil).

Please read "How to Apply for Free and Reduced Price School Meals" for more information on completing this application.

STEP 1	List ALL Household Members who are infants, children, and students up grade 12 (if more spaces are required for additional names, attach the supplemental worksheet)											
Definition of Household Member: "Anyone who is living with you and shares income and expenses, even if not related." Children in Foster care and children who meet the definition of Homeless, Migrant or Runaway are eligible for free meals. 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.	Child's First Name	MI	Child's Last Name	Date of Birth	Student		Child's School	Grade	Foster Child	Homeless, Migrant, Runaway	OPTIONAL	
	Responding to this section is optional and does not affect your children's eligibility for free/reduced price meals.											

STEP 2	Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, FIP or FDPPIR? If No, go to STEP 3. If you answered Yes, write a case number here then go to STEP 4 (Do not complete STEP 3).
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Write only one case number in this space. Medicaid and EBT card numbers are **NOT acceptable**. Case Number: _____

STEP 3	Report Income for ALL Household Members (Skip this step if you answered 'Yes' to STEP 2)	Apply Online:
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A. Total Number of All Household Members (Children + Adults)	B. Last Four Digits of Social Security Number (SSN) of Adult Household Member (last 4 digits) XXX-XX-	C. Check No SSN (adult):
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D. All Adult Household Members (include yourself): List all Household Members not listed in STEP 1 **even if they do not receive income**. If they do not receive income from any source, write '0'. If you enter '0' or leave any fields blank, you are certifying (promising) that there is no income to report. Applications with blank income fields will be processed as complete. **If more spaces are required for additional names, attach the supplemental worksheet.** The sources of income for adults section will help you with the adult income. Report all income in whole dollar amounts before deductions or taxes.

Names of All Adult Household Members	Gross Earnings from Work/All Other Income					Gross Public Assistance/Child Support/Alimony				Gross Pension/Retirement					
	How Often? (mark "X" in box)														
		Weekly	Bi-weekly	2x Month	Monthly	Yearly	Weekly	Bi-weekly	2x Month	Monthly	Weekly	Bi-weekly	2x Month	Monthly	
First and Last Names. Include children who are temporarily away at school or in college.	\$					\$					\$				
	\$					\$					\$				
	\$					\$					\$				
	\$					\$					\$				

E. Child Income: Sometimes children in the household earn or receive income. Please include the TOTAL gross earned income by all Children listed in STEP 1 here. The sources of income for children section will help you with the Child Income.	Total Income Received by All Children	How Often? (mark "X" in box)				
	\$	Weekly	Bi-weekly	2x Month	Monthly	Yearly

STEP 4	Contact Information and Adult Signature	PAGE TWO CONTAINS MORE INFORMATION
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"I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given 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."

Signature of adult completing the form	Printed name of adult completing the form	Today's Date
---	--	---------------------

Street Address (if available)	Apt. #	City	State	Zip	Daytime Phone (optional)	Email (optional)
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DO NOT WRITE BELOW THIS LINE. FOR SCHOOL ADMINISTRATIVE USE ONLY Return completed form to:

Annual Income Conversion	x52 Weekly	x26 Bi-Weekly	x24 2x Month	x12 Monthly	Yearly	Total Income: \$ _____	Application #: _____	Date Received: _____
Household Size: _____	<input type="checkbox"/> ERROR PRONE APPLICATION							
Signature and Effective Date of Determining Official			Signature and Date of Confirming Official			Signature and Date of Verification Follow-Up		
Application <input type="checkbox"/> Income <input type="checkbox"/> Foster Child <input type="checkbox"/> FIP/SNAP <input type="checkbox"/> Head Start (confirmation required) <input type="checkbox"/> Homeless/Migrant/Runaway-Local Official confirmation Required								
Eligibility Determination <input type="checkbox"/> Free <input type="checkbox"/> Reduced <input type="checkbox"/> Free Milk <input type="checkbox"/> Application Denied <input type="checkbox"/> Incomplete <input type="checkbox"/> Over Income Limits								

Low-Cost Health Insurance for Children

If your children do not have health insurance, many families getting free or reduced price meals can also get free or low-cost health insurance for their children. The law requires public schools to share your free and reduced price meal eligibility information with Medicaid and Hawki, the State's medical insurance program for children. Private schools, RCCIs and childcare organizations may choose to share this information. Specifically, we will give them your child's name, your name and address. Medicaid and Hawki can only use the information to identify children who may be eligible for free or low-cost health insurance and contact you. They are not allowed to use the information from your free and reduced meal application for any other purpose or to share it with any other entity or program. You are not required to allow us to share this information, it will not affect your child's eligibility for free or reduced price meals. **If you do NOT want your information shared with Medicaid or Hawki, you must tell us by completing the information below.** If you want further information, you may call Hawki at 1-800-257-8563. Also, if you are already receiving Medicaid or Hawki, please sign below. This will avoid another contact.

My signature below indicates I DO NOT want school officials to share information from my free and reduced price meal application with Medicaid or Hawki.

Parent/Guardian Name (Printed) _____ Signature _____ Date _____

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 submit all needed information, 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), Family Investment Program (FIP) 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.

USDA Nondiscrimination Statement: (revised 2-15-23) 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

***Do not mail applications to this address, only complaints of discrimination.**

Iowa Non-Discrimination Statement: "It is the policy of this CNP provider not to discriminate on the basis of race, creed, color, sex, sexual orientation, gender identity, national origin, disability, age, or religion in its programs, activities, or employment practices as required by the Iowa Code section 216.6, 216.7, and 216.9. If you have questions or grievances related to compliance with this policy by this CNP Provider, please contact the Iowa Civil Rights Commission, 6200 Park Ave, Suite 100, Des Moines, IA 50321; phone number 515- 281-4121, 800-457-4416; website: [https://icrc.iowa.gov/.](https://icrc.iowa.gov/)"

Return completed form to:

Jesup Community School
Attn: Admin Office/ F & R application
PO Box 287
Jesup, IA 50648

This institution is an equal opportunity provider.

Translated applications are available at: <http://www.fns.usda.gov/school-meals/translated-applications>

Waiver Information If your child(ren) qualifies for free or reduced price meals, you may also be eligible for other benefits. If you sign this waiver, your child(ren) will be considered for a full or partial waiver of school fees. I understand that I will be releasing information that will show that I applied for free and reduced meals for my child(ren). I give up my rights to confidentiality for waiver of school fees ONLY. I certify that I am the parent/guardian of the child(ren) for whom application is being made. YOU DO NOT HAVE TO COMPLETE THIS WAIVER TO GET FREE OR REDUCED PRICE SCHOOL MEALS.

Signature of Parent/Guardian _____ Date : _____

Sources of Child Income	Earnings from Work (Adult Income Sources)	Public Assistance/Alimony/Child Support (Adult Income Sources)	All Other Income (Adult Income Sources)
<ul style="list-style-type: none"> • Earnings from work • Social Security (disability payments and survivor's benefits) • Income from person outside the household • Income from any other source 	<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"> a. Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances) b. Allowances for off-base housing, food and clothing 	<ul style="list-style-type: none"> • Cash Assistance from State/local government • Supplemental Security Income • Unemployment benefits • Worker's compensation • Alimony or 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

Optional Supplemental Worksheet 2024-2025 Iowa Application for Free and Reduced Price School Meals/Milk

Additional Children in Your Household (not listed on page 1)

Child's First Name	MI	Child's Last Name	Date of Birth	Student		Child's School	Grade	Foster Child	Homeless, Migrant, Runaway	OPTIONAL	
				YES	NO					Responding to this section is optional and does not affect your children's eligibility for free/reduced price meals.	
										Ethnicity	Race
										H=Hispanic or Latino N=Non-Hispanic/Latino	A=Asian W=White I=American Indian/Alaskan Native B=Black/African American P=Native Hawaiian/Other Pacific Islander

Any income earned by the above listed children should be included under Step 3 D on the first page of the application.

Additional Adults in Your Household (Not listed on page 1)

Names of All Adult Household Members	Gross Earnings from Work/All Other Income					Gross Public Assistance/Child Support/Alimony				Gross Pension/Retirement			
	How Often? (mark "X" in box)					How Often? (mark "X" in box)				How Often? (mark "X" in box)			
	Weekly	Bi-weekly	2x Month	Monthly	Yearly	Weekly	Bi-weekly	2x Month	Monthly	Weekly	Bi-weekly	2x Month	Monthly
First and Last Names. Include children who are temporarily away at school or in college.													
	\$					\$				\$			
	\$					\$				\$			
	\$					\$				\$			
	\$					\$				\$			
	\$					\$				\$			
	\$					\$				\$			

Self-Employment Income Calculations

This guidance will assist you in calculating the amount to report if you engage in farming, are self-employed or have income from other sources.

Self-employed persons may use income tax records for the preceding calendar year as a base to project the current year's net income, unless the current monthly income provides a more accurate measure. Report income derived from the business venture less the operating costs incurred in the generation of that income. Deductions for personal expenses such as interest on home payments, medical expenses, and other similar non-business deductions are not allowed in reducing gross business income. Additional income from other kinds of employment must be treated as separate and apart from the income generated or lost from your business venture. For example, if you operated a business at a net loss, but held additional employment for which a salary was received, the income for purposes of applying for reduced price or free meals would be the income from the salary only. The loss from the business cannot be deducted from a positive income earned in other employment. For purposes of this application, it is not possible to report a negative income from any business venture. The least income possible is zero (no income). The necessary information for arriving at allowable income from private business operation may be taken from your most recent U.S. Individual Income Tax Return - Form 1040 or 1040-SR and Schedule 1. Add together the amounts reported on the following lines:

- Capital Gain or (Loss) Form 1040 or 1040-SR, LINE 7 \$ _____
- Business Income or (Loss) Schedule 1 Part 1, LINE 3 \$ _____
- Other Gains or (Losses) Schedule 1 Part 1, LINE 4 \$ _____
- Rental real estate, royalties, partnerships, S corporations, trusts, etc. Schedule 1 Part 1, LINE 5 \$ _____
- Farm Income or (Loss) Schedule 1 Part 1, LINE 6 \$ _____

TOTAL \$ _____ Gross Annual Income Before Any Deductions. Report in Step 3 under All Other Income (**Computed Monthly Income \$ _____** Gross Annual Income ÷ 12)



BENEFITS AND RESOURCES

How to Apply for HHS Benefits



SNAP

Provides food benefits to low-income families to supplement their grocery budget so they can afford the nutritious food essential to their health and well-being.

- Visit the hhs.iowa.gov and click “Apply for Food Assistance”
- Your local HHS office

- ✉ Mail a completed application to Imaging Center 4
PO Box 2027
Cedar Rapids, IA 52406
- ✉ Send a completed application to the local HHS office via email (imagingcenter4@dhs.state.ia.us) or fax (515-564-4016)



Medicaid

Iowa Medicaid provides health coverage to eligible Iowans including low-income adults, children, pregnant women, older adults and people with disabilities.

- Visit the hhs.iowa.gov and click “Apply for Medicaid”
- [Healthcare.gov](https://www.healthcare.gov)
- 👛 At any local HHS office or federally qualified health center in Iowa

- ✉ Mail a completed application to Imaging Center 4
PO Box 2027
Cedar Rapids, IA 52406
- ☎ Call 1-855-889-7985 to complete an application over the phone
- ✉ Send a completed application to the local HHS office via email (imagingcenter4@dhs.state.ia.us) or fax (515-564-4017)



Rent Reimbursement

Provides up to \$1000 reimbursement of rent paid by elderly and income-eligible disabled persons who pay rent in buildings that are not tax-exempt.

➤ Visit the hhs.iowa.gov and click “Apply for Services”

☎ Iowa’s Aging and Disability Resource Center 1-866-465-7887

➤ Visit [LIFELONG LINKS](#)

👛 Iowa Community Action Association

👛 Your local HHS office

☎ Rent Reimbursement Unit
515-420-6077



Child Care Assistance

Helps families in Iowa struggling with the increasing quality care costs. Child care assistance keeps Iowa thriving and allows more parents to remain in the workforce, earning income.

➤ Visit the hhs.iowa.gov and click “Apply for Child Care Assistance”

✉ Print an application from the HHS website and mail to
HHS CCA Eligibility
2309 Euclid Ave
Des Moines, IA 50310-5703

👛 Your local HHS office



FIP

Provides cash assistance and employment and training services to families with children. The goal of the program is to help families become self-supporting.

➤ Visit the hhs.iowa.gov and click “Apply for Services”

👛 Your local HHS office

✉ Mail Completed application to
Imaging Center 4
PO Box 2027
Cedar Rapids, IA 52406

📧 Send a completed application to the local HHS office via email (imagingcenter4@dhs.state.ia.us) or fax (515-564-4016)

BackPack Program 2024-2025

Dear Parents/Guardians,

Jesup Community Schools is partnering with the Northeast Iowa Food Bank to provide the Backpack Program to students during the 2024-2025 school year. The program begins in September and will continue throughout the school year.

The Backpack Program is a free program that provides kid-friendly, non-perishable food for students most in need to eat over weekends and breaks when school meals are not available and there may be little or no food to eat. Please carefully consider your family's economic status and determine if this program is something needed by your child(ren). If the Backpack Program is something your family depends upon, please complete the attached registration form. If you are able to make do without this assistance, please allow this program to be used by others.

Items distributed in the Backpacks include cereal, peanut butter, juice, fruit cups, pop-top meals, soup, and granola bars. The food will be distributed to your child at the end of the school day on Friday. **Please explain to your child that the food must not be eaten or opened until they are home.** If this happens, your child may lose the privilege of participating in the program.

Parents and guardians concerned with food allergies need to be aware that Backpack Program items may include ingredients such as nuts, soy, wheat, eggs and milk. The Northeast Iowa Food Bank and Jesup Schools will not assume any liability for adverse reactions to food consumed.

The Northeast Iowa Food Bank strives to include healthy and safe food. All food is labeled and sealed by the manufacturer. **While some products might be past the marked best-by date, we have worked with the manufacturer to ensure they are still safe to consume.** If you open an item and notice a problem, please contact the Northeast Iowa Food Bank immediately.

Sincerely,

Daniel Hofer
Partner Capacity Coordinator
Northeast Iowa Food Bank
319-235-0507 ext. 127

Dorthea Bovy
Elementary School Counselor
Jesup Community Schools
319-827-1700 ext. 1126



NORTHEAST IOWA
FOOD BANK

The Backpack Program is a program of the Northeast Iowa Food Bank
1605 Lafayette Street
P.O. Box 2397
Waterloo, IA 50704
(319) 235-0507 · www.neifb.org

BackPack Program 2024-2025 Registration Form

Parent/Guardian Name: _____

Address: _____

_____ Phone: _____

School your child(ren) attend: _____

Please list children participating in the program.

Name	Grade	Teacher	Any Food Allergies?

By signing this form, I agree to allow my child(ren) to participate in the BackPack Program of the Northeast Iowa Food Bank and Jesup Schools.

I understand that for children with food allergies, BackPack Program items may contain ingredients such as nuts, soy, wheat, eggs and milk. Parents/guardians concerned with food allergies need to be aware of this risk. The Northeast Iowa Food Bank and Jesup Schools do not assume any liability for adverse reactions to food consumed.

The Northeast Iowa Food Bank strives to include healthy and safe food. **While some products might be past the marked best-by date, we have worked with the manufacturer to ensure they are still safe to consume.** If you open a package and notice a problem, please contact the Northeast Iowa Food Bank immediately.

To promote and expand the BackPack Program, the Northeast Iowa Food Bank and Jesup Schools may wish to use images (but no names) of children who are participating in the BackPack Program in materials that may include (but are not limited to) brochures, newsletters, and the Northeast Iowa Food Bank website.

- I grant permission to use images of my child(ren). I understand that my child's name and personal information will not be used in conjunction with any images.
- I deny permission to use images of my child(ren).

By signing this form I agree to assume any and all risks associated with my child(ren) participation in the BackPack Program including any adverse reaction my child may have to foods consumed.

Parent/Guardian Signature

Date



2024

This institution in an equal opportunity provider

Sunday	Monday					Saturday
1% white milk, skim white milk, fat free chocolate milk offered for every meal.						3/
4/	5/	6/	7/	8/	9/	10/
11/	12/	13/	14/	15/	16/	17/
18/	19/	20/			23/ BREAKFAST: Snackbread LUNCH: Pizza Crunchers - Marinara Dipping Sauce - Shredded Romain w/ LC Ranch - Apple Slices - WG Cookie ALTERNATE: Ham & Cheese w/ WG Bun	24/
25/	26/ BREAKFAST: Pop Tart LUNCH: Hamburger w/ WG Bun - Smiley Fries - Tomato Slice - Raisels ALTERNATE: Ham & Cheese w/ WG Bun	27/ BREAKFAST: Mini Waffles w/ SF Syrup LUNCH: Crisпитos - Salsa - Toss Salad w/ LC Ranch - Banana ALTERNATE: Combo Sub w/ WG Bun	28/ BREAKFAST: Skillet Omelet w/ Cheddar Cheese LUNCH: Popcorn Chicken - Mashed Potatoes - Dinner Roll - Cucumber Slices w/ LC Ranch - Applesauce Cup ALTERNATE: Sunbutter Sandwich NUT FREE	29/ BREAKFAST: Breakfast Pizza LUNCH: Beef Pretzel Dog (Pig in a Blanket) - Baked Beans - Carrot Sticks w/ LC Ranch - Mixed Fruit ALTERNATE: Turkey & Cheese Wrap	30/ BREAKFAST: Mini Cinni LUNCH: Stuffed Crust Pizza - Fresh Broccoli w/ LC Ranch - Dragon Punch Juice - Pineapple Tidbits - WG Cookie ALTERNATE: Ham Sandwich w/ WG Bun	31/

BREAKFAST options include cereal variety, oatmeal, toast, applesauce, fresh fruit, orange juice, apple juice, and grape juice
SALAD BAR offered for grades 5 - 12 daily. Items may include lettuce, fresh fruit and vegetables, canned fruits, diced egg, diced ham, pasta salad and yogurt
****MENUS ARE SUBJECT TO CHANGE****

AUGUST 2024

SUN 28	MON 29	TUE 30	WED 31	THU Aug 1	FRI 2	SAT 3
	<ul style="list-style-type: none"> 10am Sprout 5pm Sprout 			Online Registr	8am Free R	
4	5	MS 5th grade r	7	8	9	10
11	School Board ↓	13	14	15	16	17
18	19	20	1:30pm 5th	22	First Day of Sc <ul style="list-style-type: none"> 5:15pm XC 6pm FB Scri 	8:30am VB!
25	26	First Day of Sci	28	5pm JV VB	5pm Freshn	9am V VBTc
						Booster Golf Outing

September 2024

This institution in an equal opportunity provider

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1% white milk, skim white milk, fat free chocolate milk offered for every meal.		3/ BREAKFAST: French Toast Sticks w/ LC Syrup LUNCH: Chicken & Cheese Quesadilla - Corn - Carrot Sticks w LC Ranch - Diced Peaches ALTERNATE: Combo Sub w/ WG Bun	4/ BREAKFAST: Breakfast Bar (Ham or Sausage) LUNCH: Egg & Cheese Breakfast Bagel - Jumbo Hashbrown Rounds - String Cheese - Orange Juice Cup ALTERNATE: Ham & Cheese w/ WG Bun	5/ BREAKFAST: Pancake Sausage Stick w/ LC Syrup LUNCH: Hot Dog w/ WG Bun - Baked Beans - Shredded Romain w/ LC Ranch - Diced Strawberries ALTERNATE: Turkey & Cheese Wrap	6/ BREAKFAST: WG Long John Donut LUNCH: Mozzarella Cheese Bites - Marinara Dippin Sauce - Celery Sticks w/ LC Ranch - Orange - Frozen Yogurt ALTERNATE: Sunbutter Sandwich (NUT FREE)	7/
8/	9/ BREAKFAST: Fruit Frudel (Apple or Strawberry) LUNCH: Breaded Chicken Patty w/ WG Bun - Steamed Carrots - Dragon Punch Juice - Apple Slices ALTERNATE: Ham Sandwich w/ WG Bun	10/ BREAKFAST: Mini Pancakes w/ LC Syrup LUNCH: Walking Tacos w/ WG Nacho Chips - Shredded Lettuce - Diced Tomatoes - Shredded Cheese - Banana ALTERNATE: Cold Meat Sandwich w/ WG Bun	11/ BREAKFAST: Sausage/Egg/Cheese Combo Link LUNCH: Beef Lil Smokies - WG Soft Pretzel - Baked Beans - Cucumber Slices w/ LC Ranch - Frozen Fruit Cup ALTERNATE: Combo Sub w/ WG Bun	12/ BREAKFAST: Yogurt Parfait LUNCH: Breaded Fish Sticks - Potato Salad - Carrot Sticks w/ LC Ranch - Diced Pears ALTERNATE: Ham & Cheese w/ WG Bun	13/ BREAKFAST: Egg/Cheese Breakfast Bagel LUNCH: Cheese Pizza Round - Fresh Broccoli & Toss Salad w/ LC Ranch - Raisels - WG Brookee ALTERNATE: Turkey Swiss Wrap	14/
15/	16/ BREAKFAST: Cinnamon Cream Cheese Pretzel Stick LUNCH: Grilled Cheese Sandwich - Tomato Soup - Celery Sticks w/ LC Ranch - Mixed Fruit ALTERNATE: Cold Meat Sandwich w/ WG Bun	17/ BREAKFAST: Sausage/Egg/Potato Power Bites LUNCH: Breaded Corn Dog - Hashbrown Patty - Carrot Sticks w/ LC Ranch - Diced Peaches ALTERNATE: Combo Sub w/ WG Bun	18/ BREAKFAST: !!NEW!! Egg & Bacon Bites LUNCH: Turkey & Noodles - Dinner Roll - Mixed Veggies - Dragon Punch Juice - Applesauce ALTERNATE: Sunbutter Sandwich (NUT FREE)	19/ BREAKFAST: Mini Donuts LUNCH: Cheddarwurst w/ WG Bun - Baked Beans - Grape Tomatoes - Diced Strawberries ALTERNATE: Turkey & Cheese Wrap	20/ BREAKFAST: Scrambled Egg w/ WW Toast LUNCH: Mascot "J-Hawk" Cheesy Garlic Bread - Marinara Dipping Sauce - Shredded Romain w/ LC Ranch - Apple Slices - Orange Sherbet ALTERNATE: Ham & Cheese w/ WG Bun	21/
22/	23/ BREAKFAST: Muffin LUNCH: !!NEW!! WG Pepperjack Pretzel Bites - Cucumber Slices & Carrot Sticks w/ LC Ranch - Pineapple Tidbits ALTERNATE: Ham Sandwich w/ WG Bun	24/ BREAKFAST: Mini French Toast w/ LC Syrup LUNCH: Beef Taco Stick - Shredded Lettuce - Diced Tomato - Raisels ALTERNATE: Combo Sub w/ WG Bun	25/ BREAKFAST: Biscuits & Gravy LUNCH: Spahgetti w/ Meat Sauce - Garlic Toast - Green Beans - Frozen Fruit Slushie Cup ALTERNATE: Ham & Cheese w/ WG Bun	26/ BREAKFAST: !!NEW!! Breakfast Flatbread LUNCH: Hot Ham & Cheese w/ WG Bun - Baked Beans - Fresh Cauliflower w/ LC Ranch - Diced Pears ALTERNATE: Sunbutter Sandwich (NUT FREE)	27/ BREAKFAST: WG Cinnamon Roll LUNCH: Pizza Crunchers - Marinara Dipping Sauce - Fresh Broccoli w/ LC Ranch - Fresh Kiwi - WG Brownie ALTERNATE: Cold Meat Sandwich w/ WG Bun	28/
29/	30/ BREAKFAST: Snackbread LUNCH: Sloppy Joe w/ WG Bun - Smiley Fries - Dragon Punch Juice - Applesauce ALTERNATE: Turkey & Cheese Wrap					

BREAKFAST options include cereal variety, oatmeal, toast, applesauce, fresh fruit, orange juice, apple juice, and grape juice

SALAD BAR offered for grades 5 - 12 daily. Items may include lettuce, fresh fruit and vegetables, canned fruits, diced egg, diced ham, pasta salad and yogurt

****MENUS ARE SUBJECT TO CHANGE****

SEPTEMBER 2024

SUN Sep 1	MON 2	TUE 3	WED 4	THU 5	FRI 6	SAT 7
	NO School Labor Day 6pm JV FB	4:30pm XC 5:30pm JV/	1:15pm Earl	6pm XC @ S	8am Free R 5pm Fresh/	9am JV VB
8	School Board	SCHOOL PICTL 5:30pm HS	11	4:15pm MS	7pm V FB @	9am V VB Tr
15 First Day of H	6pm JV FB	4:15pm MS 5:30pm HS	18	4pm XC @ C 4:15pm MS 4:15pm MS	HOMECOMING 5pm Fresh/	9am V VB Tr
22	4:15pm MS 6pm JV FB	5:30pm HS	25	4:15pm MS 4:15pm MS 4:15pm XC	5pm Fresh/ 6pm 5th/6th	8:30am V VI
29	JV FB vs DNH 5:30pm Fres	Oct 1	2	3	8am Free R	5

2024-2025 School Calendar

Summary of Calendar:
 Days/Hrs. in the classroom:
 First Semester 86/551
 Second Semester 92/586
TOTAL DAYS/HRS 178/1137

CALENDAR LEGEND

- Begin/End.....
- Early Dismissal
- Quarter.....
- Trimester.....
- Holidays.....
- Vacation Days.....
- PD Days.....
- P/T Conf.....

HOLIDAYS:

Labor Day (9/4)
 Thanksgiving Day (11/28)
 New Year's Day (1/1)
 Memorial Day (5/26)

SNOW MAKE-UP DAYS:

Early Dismissal:

Sept 4 Jan 17 Apr 2
 Oct 2 Feb 5 May 7
 Nov 6 Mar 5 May 30
 Dec 4 Mar 18

No School for students:

Sept 2 Dec 23-Jan 3 Apr 18-21
 Oct 7 Jan 13 May 26
 Nov 8 Jan 20
 Nov 27-29 Mar 19-24

Professional Development:

Aug 16 Aug 22 Jan 20
 Aug 19 Oct 7 Mar 24
 Aug 20 Jan 3 Apr 21
 Aug 21 Jan 13

August 2024					Student Days/Hours	
M	T	W	Th	F		
12	13	14	15	16		
19	20	21	22	23	1	6.5
26	27	28	29	30	6	39
September 2024						
2	3	4	5	6	10	63
9	10	11	12	13	15	95.5
16	17	18	19	20	20	128
23	24	25	26	27	25	160.5
30					26	167
October 2024						
	1	2	3	4	30	191
7	8	9	10	11	34	217
14	15	16	17	18	39	249.5
21	22	23	24	25	44	282
28	29	30	31		48	308
November 2024						
				1	49	314.5
4	5	6	7	8	54	345
11	12	13	14	15	59	377.5
18	19	20	21	22	64	410
25	26	27	28	29	66	423
December 2024						
2	3	4	5	6	71	453.5
9	10	11	12	13	76	486
16	17	18	19	20	81	518.5
23	24	25	26	27		
30	31					
January 2025						
		1	2	3		
6	7	8	9	10	86	551
13	14	15	16	17	90	577
20	21	22	23	24	94	603
27	28	29	30	31	99	635.5
February 2025						
3	4	5	6	7	104	666
10	11	12	13	14	109	698.5
17	18	19	20	21	114	731
24	25	26	27	28	119	763.5
March 2025						
3	4	5	6	7	124	794
10	11	12	13	14	129	824.5
17	18	19	20	21	132	844
24	25	26	27	28	136	870
31					137	876.5
April 2025						
	1	2	3	4	141	900.5
7	8	9	10	11	146	933
14	15	16	17	18	150	959
21	22	23	24	25	154	985
28	29	30			157	1004.5
May 2025						
			1	2	159	1017.5
5	6	7	8	9	164	1048
12	13	14	15	16	169	1080.5
19	20	21	22	23	174	1113
26	27	28	29	30	178	1137
June 2025						
2	3	4	5	6		
9	10	11	12	13		

180 Days/1080 Hours Calendar

Aug 16-22 New to Teaching Prof Dev
 Aug 19-22 New to District Prof Dev
 Aug 20-22 Professional Development (All)
 Aug 23 K-12 1st Day of School
 Aug 27 PS/PK 1st Day of School

Sept 2 No School (Labor Day)
 Sept 4 Early Dismissal (PD)

Oct. 2 Early Dismissal (PD)
 Oct 7 No School (PD)

Oct 25 End 1st Quarter (44 days)

Nov 6 Early Dismissal - PT Conf (2:00-7:00)
 Nov 7 PT Conf 3:30-7:00
 Nov 8 No School (Comp Day)
 Nov 15 End 1st Trimester (59 days)
 Nov 27-29 No School

Dec 4 Early Dismissal (PD)

Dec 23 Begin Winter Break

Jan 3 No School (PD/WD)
 Jan 6 Classes Resume
 Jan 10 End 2nd Quarter (42 days)/1st Semester (86 days)
 Jan 13 No School (PD/WD)
 Jan 20 No School (PD/WD)

Feb 5 Early Dismissal (PD)

Feb 27 End 2nd Trimester (59 days)

Mar 5 Early Dismissal (PD)
 Mar 13 PT Conf 3:30-7:00
 Mar 18 End of 3rd Quarter (46 days)
 Mar 18 Early Dismissal PT Conf 2:00-7:00
 Mar 19 No School (Comp Day)
 Mar 20-21 No School (Spring Break)
 Mar 24 No School (PD)

Apr 2 Early Dismissal (PD)

Apr 18 No School
 Apr 21 No School (PD)

May 7 Early Dismissal (PD)
 May 18 Graduation
 May 26 No School (Memorial Day)
 May 30 Early Dismissal
 May 30 Last Day of School

Developing Lifelong Learners

JESUP COMMUNITY SCHOOLS

Educating students since 1870

The quarterly newsletter is for the parents and patrons of the Jesup Community School District. It includes articles written by faculty, administrators, and students as well as general announcements. Any questions, comments, or suggestions should be directed to Margie Knipp at

mknipp@jesup.k12.ia.us

Thank you for your interest in our schools.

NEWS ON SCHOOL CANCELLATIONS AND DELAYS

In the event of weather-related school dismissals or cancellations, **please do not call the school offices or TV stations**. This ties up the phone lines and prevents necessary calls regarding dismissals or cancellations from being made. For up-to-date information regarding school dismissals or cancellations, check the school website: www.jesup.k12.ia.us (alerts scroll near top of screen), or listen to TV stations.

KGAN—(TV)2 KWWL—(TV)7 KCRG—(TV)9

You may also sign up for the Infinite Campus Parent Portal to receive texts directly to your phone or emails.

Important Note: When school is canceled, all scheduled activities are canceled. When school begins late, all morning activities are canceled.

Parents....Please Note!

When school is delayed there is no breakfast served before school starts.

Asbestos Notice

All friable asbestos has been removed from the building. All non-friable asbestos has been covered. The district is in compliance with federal regulatory requirements. Information on asbestos is available in the office of the Superintendent. A copy of the asbestos report is available in the head custodian's office.

It is the policy of the Jesup Community School District not to illegally discriminate on the basis of race, color, national origin, gender, disability, religion, creed, age (for employment), marital status (for programs), sexual orientation, gender identity and socioeconomic status (for programs) in its educational programs and its employment practices. There is a grievance procedure for processing complaints of discrimination. If you have questions or a grievance related to this policy please contact the district's Equity Coordinator:

Gina Feldt, Jesup Middle School

531 Prospect Street P.O. Box 287

Jesup, Iowa 50648-0287

319.827.1700 ext 1202 gfeldt@jesup.k12.ia.us

Information for Parents

If your family lives in any of the following situations:

- In a shelter, motel, vehicle, or campground
- On the street
- In an abandoned building, trailer, or other inadequate accommodations, or
- Doubled up with friends or relatives because you cannot find or afford housing

Then, your preschool-aged and school-aged children have certain rights or protections under the McKinney-Vento Homeless Education Assistance Act.

For further assistance, call:

Brian Pottebaum, Local Area Contact

319.827.1700, ext, 1102 or

Donna Eggleston, State Coordinator 515.281.3999

Transportation Reminders

- Students in PreK through 2nd grade will not be allowed off the school bus unless a parent/guardian is visible at the drop-off location.
- Please be ready on time - times may vary due to someone not riding or weather conditions.
- Please follow the rules.
- Please notify the transportation office when not riding.
- (319) 827 - 1700, ext. 1411

