Educational Benefits Form Online Registration

ACCESS: After logging into Infinite Campus, you will need to gain access to the *Educational Benefits* application. Go to the *More* section and choose *Meal Benefits*.
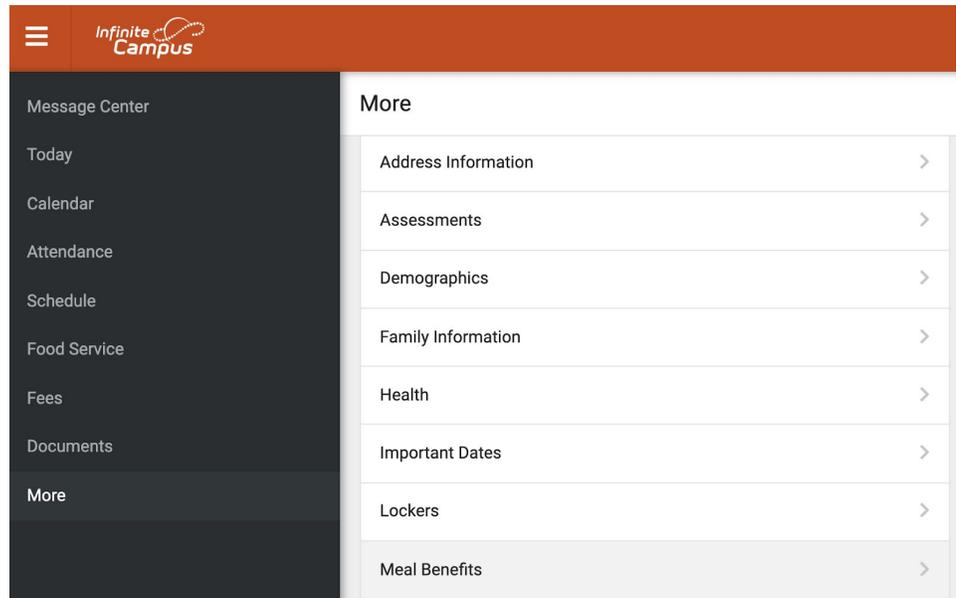
START THE PROCESS: Click on *"Click here to start the application process."*
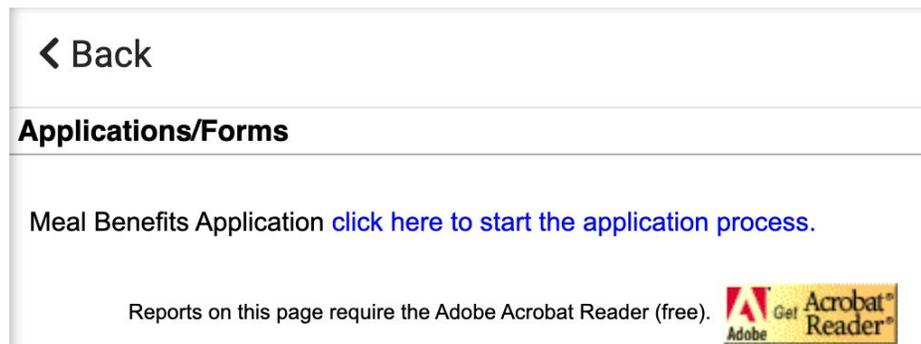
GENERAL INFO: Review *Letter to Household* screen; this provides basic information on the application process.

At the bottom of each screen (you may need to scroll down to see these buttons) is the **Next** button; click **Next** to advance to the next section of the application.
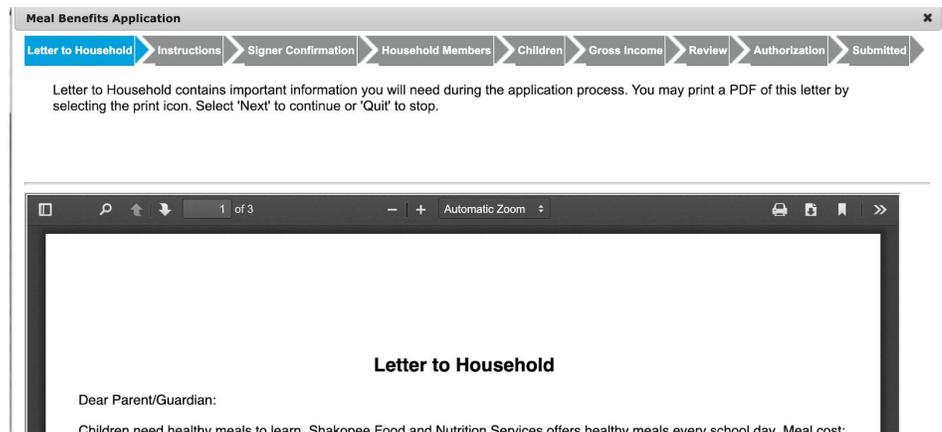
INSTRUCTION SCREEN: Contains additional information about completing the application.

STEP ONE, SIGNER CONFIRMATION: This screen confirms who is completing the application. Select (check box) for the person completing it; usually this is already checked.

Meal Benefits Application ✖

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Please review the application signer's name and household address below. Confirm you are the person signing this online application by selecting 'Next'. Select 'Quit' if you are not this person or if you do not wish to continue.

STEP TWO, HOUSEHOLD CONFIRMATION: This screen confirms who is part of the household. Select (check box) for all household members.

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Household Members are listed below. You must confirm each person living in your household by selecting the check box next to their name. If a person listed below is no longer living in your household, do not check the box next to their name. If there are persons missing from your household you will need to add them by selecting the 'Add Household Member' button. You are not allowed to edit existing household member information or uncheck the application signer. After you have identified and/or added household members select 'Next' to continue.

In this screen, you will see a pop-up message when clicking **Next** that asks a question.

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Do any household members receive benefits? (SNAP, TANF, or FDPIR)

[No] [Yes]

STEP THREE, CHILDREN: This screen confirms the children in the household who are included in the application.

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Child Members of the household must be confirmed by selecting the check box next to their name. Children are those members age 18 or under AND are supported with the household's income. After you have identified each child member, select 'Next'.

You will see a pop-up message when clicking Next that asks two questions below. Please answer Yes or No depending on your situation.

STEP FOUR, GROSS INCOME: This screen asks for household earnings; the frequency drop down allows you to select how often the amount occurs, such as weekly, monthly, annually and other options.

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If a Benefit or Student indicator is selected for any student, income information is not required. Providing your income information may help with the district verification process. For each Adult Household Member, report the total income for each source in whole dollars only. If they do not receive income from any source, write '0'. If you enter '0' or leave any fields blank, you are certifying that there is no income to report.

Income Type	Amount	Frequency
Earnings from Work		
Welfare, Child Support, Alimony		
Pensions, Retirement, Social Security, SSI, VA Benefits		
All Other Income		

[Cancel] [Save] [Clear All]

REVIEW INFORMATION: This section of the applications allows you to verify the information in case you need to go back and make any corrections.

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Review the household information below for accuracy. If any of the information is incorrect, select 'Previous' to go back and correct the data. After household information is reviewed select 'Next' to continue.

AUTHORIZATION:
This screen has a few follow-up questions about how data may be shared; please review and make the appropriate selections.

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You must respond to [insert appropriate options here] and read the authorization statement below. By selecting 'Accept' you agree to the authorization statement and you will be taken to the Electronic Signature PIN entry screen to submit the application.

By selecting 'Decline' you do not agree to the authorization statement, the application will be cancelled and your information will no longer be available. If you choose to 'Decline' you may enter another application at any time.

Because health insurance is so important to child(ren)'s well-being, the law allows us to tell Medicaid and SCHIP that your children are eligible for free or reduced meals, UNLESS YOU TELL US NOT TO. Medicaid and SCHIP only use the information to identify children who may be eligible for their programs. Program officials may contact you to offer to enroll your children. Filling out the Meal Benefits Application does not automatically enroll your children in health insurance.

If you do not want your school district to share your information with Medicaid or SCHIP, please select 'No' below.
Allow my district to share my Meal Benefits Application information with Medicaid?   ●Yes ○No
Allow my district to share my Meal Benefits Application information with SCHIP?   ●Yes ○No

Social Security Number
The income section of this application has been filled out. You are required to provide the last four digits of your SSN. Please enter the last four digits of your SSN or mark the "I do not have a SSN" box.

This screen is the final signature to complete the application. If you do not have or do not remember your PIN, select the Forgot your PIN option to create a new one.

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Apply E-Signature

Terms of Use

Shakopee Public Schools has adopted the use of electronic signatures for some documents. By registering and creating your electronic signature PIN you will be able to apply your signature electronically to some documents the district publishes that require your signature. Registration is easy to complete and takes less than 5 minutes.

Once registered, documents or applications that accept an E-signature may also give you the option to not use your electronic signature and instead print the document, sign, and submit the paper form. Not all documents or applications will require a PIN.

Enter your E-Signature PIN [   ]

[Submit]   [Do not use E-Signature]   [Forgot your PIN?]

RESETTING A PIN: The next two screens show the option to Reset your PIN in order to complete the electronic signature process, if necessary. Skip the review of this section if you successfully entered your PIN.

Reset your PIN ❓

PIN

Re-enter PIN

Password

Submit **Cancel**

Reset your PIN ❓

PIN

••••• Enter five (5) letters, numbers or special characters (!@#$%^&*+?~!=). You must have at least one each of two of the types.

Re-enter PIN

••••• Enter five (5) letters, numbers or special characters (!@#$%^&*+?~!=). You must have at least one each of two of the types.

Password

Submit **Cancel**

SUBMISSION: At this point, all information is complete the application has been submitted.

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Your application has been submitted. Please print this page for your records. This will include the information you provided on your application. A submission notice and final summary report has also been sent to your Portal Process Inbox. You may 'Quit' or safely close out of the application at this time.

You can close the application at this point; if you select Quit, you'll see the screen below. Click **Yes** to continue.

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You have selected to quit the application process, are you sure?

Cancel **Yes**