

HOPKINTON PUBLIC SCHOOLS



SHARING INFORMATION WITH OTHER PROGRAMS

Dear Parent/Guardian:

To save you time and effort, the information you gave on your Free and Reduced Price School Meals Application may be shared with other programs for which your children may qualify. **For the following programs, we must have your permission to share your information. Sending in this form will not change whether your children get free or reduced price meals.**

No! I **DO NOT** want information from my Free and Reduced Price School Meals Application shared with any of these programs.

Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with all **Hopkinton Public School Departments charging fees.**

The fees to which this may apply (if applicable) are bus transportation, parking, athletic, and tuition. The waiver of fees for other school activities is at the sole discretion of the school principal as determined by the availability of funds.

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____ Address: _____

For more information, you may call Dianne Potter at (508) 417-9381 or e-mail at transportation@hopkinton.k12.ma.us.

Return this form to: Hopkinton Public Schools, Administration Building, 89 Hayden Rowe Street, Hopkinton, MA 01748 – Attn: Dianne Potter.