California Department of Education Child Nutrition Programs

Nutrition Services Division June 2025

# Letter of VERIFICATION RESULTS for Universal Benefits Applications

Date: Enter Date Benefit Change Date: Enter Benefit Change Date

RE: Enter Child(ren)'s Name(s) School: Enter School/District Name

Dear Enter Parents/Guardian’s Name:

We have completed the Verification process of your submitted SUN Bucks application. Your child(ren)'s eligibility status will be:

**[ ]  Changed from Eligible for SUN Bucks to Not Eligible for SUN Bucks with the benefit change date above.**

This decision is based on (check one):

[ ]  Our verification of $Enter Household Income for your household income and Enter Number of Household Members household members, which puts your household over the allowable amount for SUN Bucks.

[ ]  Your failure to comply with our verification efforts.

**Regardless of the change to your child(ren)’s eligibility status for SUN Bucks, under Education Code (EC) 49501.5 and the Universal Meals Program, your child(ren) will continue to have access to FREE meals at their school.**

Should your income decrease or your household size increase at any time during the year, you may submit a new Universal Benefits application to change your child(ren)’s eligibility status.

If you disagree with this decision, you may file an appeal with the school’s hearing official. An appeal may be filed by calling or writing:

Enter Name of Hearing Official

 Enter Title of Hearing Official

 Enter Address of School/District

Enter City, State, Zip

Enter Telephone Number and Extension

## Discrimination Complaint

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the State or local Agency that administers the program or contact USDA through the Telecommunications Relay Service at 711 (voice and TTY).

Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at [How to File a Program Discrimination Complaint](https://www.usda.gov/oascr/how-to-file-a-program-discrimination-complaint) and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form.

To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Mail Stop 9410, Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

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