

S.S. Dixon Intermediate School

*5540 Education Drive
Pace, Florida 32571
Phone 850-995-3650
Fax 850-995-3655*

*Linda Gooch
Principal*



*Candace Hendricks
Assistant Principal*

January 2020

SS Dixon Intermediate Parents,

To qualify as a Title 1 school SSDI must have a set percentage of our students qualifying for free or reduced meals. The qualifications are set by the Federal Government and are posted below. At the present time, we have over 500 students whose parents didn't complete the free/reduced application. Even if your child never eats a meal in the school's cafeteria, we are asking that you do complete an application. The percentage of qualified applications is what defines our percentage not the number of meals served. If we do not meet the required percentage to qualify as a Title 1 school, we will not be able to provide some of the services we have been providing such as: some of our computer-based programs, parent involvement events, salaries for additional paraprofessionals, and tutoring services.

If you would like to speak with administration, please feel free to call the school at 995-3650. If you don't have access to a computer a paper copy of the application can be sent home with your child. Mrs. Gooch or Mrs. Hendricks can complete an application for you if that is helpful. Please just let us know.

Thank you for your assistance.

Listed below are the guidelines for meal assistance. If you earn below the amounts listed below you will qualify for either free or reduced meals. To apply visit:

<https://www.myschoolapps.com/Application>

Respectfully,

Linda Gooch

Our students will be productive, successful contributors to society.

Home of the Junior Patriots

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FLORIDA INCOME ELIGIBILITY GUIDELINES FOR FREE AND REDUCED-PRICE MEALS

Effective from July 1, 2019 to June 30, 2020

FREE MEAL SCALE					
Household Size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	16,237	1,354	677	625	313
2	21,983	1,832	916	846	423
3	27,729	2,311	1,156	1,067	534
4	33,475	2,790	1,395	1,288	644
5	39,221	3,269	1,635	1,509	755
6	44,967	3,748	1,874	1,730	865
7	50,713	4,227	2,114	1,951	976
8	56,459	4,705	2,353	2,172	1,086
For each additional family member, add	+ 5,746	+ 479	+ 240	+ 221	+ 111

REDUCED-PRICE MEAL SCALE					
Household Size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	23,107	1,926	963	889	445
2	31,284	2,607	1,304	1,204	602
3	39,461	3,289	1,645	1,518	759
4	47,638	3,970	1,985	1,833	917
5	55,815	4,652	2,326	2,147	1,074
6	63,992	5,333	2,667	2,462	1,231
7	72,169	6,015	3,008	2,776	1,388
8	80,346	6,696	3,348	3,091	1,546
For each additional family member, add	+ 8,177	+ 682	+ 341	+ 315	+ 158

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