



FROM THE EXECUTIVE DIRECTOR

Mid-September marks a school year well underway. Students have transitioned well from summer and are now in the full swing of academic life at the South Shore Charter Public School. As teaching and learning pervades our classes and hallways, it is a good time to reflect upon our mission and ask ourselves if we are living up to that mission every day we are here.

If you decided to dissect our mission into key vocabulary, you would come across the words *inspire*, *excel*, *academics*, *service*, and *life*. These five are not words selected because the school community believes they sound good and look impressive on a web page; instead they were chosen because we truly believe that these words best represent who we are as a school and what we value as we make our way through each day. Also included in the mission is the pairing, *every student*, because that is who we want to inspire to reach lifetime goals and to surpass our greatest expectations.

This week we experienced some interesting discussions regarding the athletic life of the South Shore Charter Public School, the fall athletic program, and the student athletes of Levels III and IV. I would like to take this opportunity to clarify some of the decisions that were made in light of our growing athletic program and who we are as a school.

When deciding upon policies with significant impact, we always try to focus on what we as a school believe, what we as a community value, and how what we do each day relates to our mission. However, the most important focus is on children, and in this case, middle school children.

Middle school is not simply the grades between elementary school and high school, but instead, a fascinating period of childhood growth and development. Students enter the sixth grade as elementary school children and leave three years later as young adults. These three years are an exceedingly important time for young people. They are a time of testing limits, determining reasonable boundaries, and exploring individuality and self-placement within a larger world.

Physically middle school students grow and develop at different rates, girls tend to develop before boys, and there are individual variations in this development that make each day unique from the one before it. An eighth grade student who may lack the coordination to dribble a basketball in the fall may by spring develop into a young adult who can dribble and shoot up and down a court seamlessly. Predictions based upon the current ability of a middle school child are a risky endeavor. Every middle school student should have the opportunity to pursue an interest; regardless of their talent or ability at a particular point in time.

The middle school soccer team is for middle school students. Three out of the four grades in Levels III and IV are middle school grades. This means that students who are in grades six, seven and eight are invited to be members of the middle school soccer team. The prerequisite for the team is passion for the game. It is important to remember that, at the middle school level, the priority is on the development of skills and being part of the team, not on winning the game. We made this determination by keeping both our mission and the uniqueness of the middle school child in mind, and each with equal weight.

I understand how a fifth grade student may be disappointed at having to wait a year to become part of the middle school team. Many of our fifth grade students are experienced soccer players who could add considerable value during practices and competition. And some of these students may have more experience and skill than a player on the middle school team. However, a fifth grade student's ability to play a sport well cannot result in a middle school student getting cut from the middle school team just because his or her skills have not yet matched their inspiration. As a school community, that is the wrong message to send to our young people.

It is absolutely wonderful that we have a considerable number of fifth grade students who have expressed an interest in playing on the middle school team. All Level III students are welcome to play on the fifth and sixth grade intramural team. The intramural team was established this week when coaches made us all realize the need for more opportunities for *every student* with a desire to be a part of athletic life at the South Shore Charter Public School.

As always, please do not hesitate to contact me directly with any questions you may have.

Thank you, Alicia Savage, asavage@sscps.org

Thursday	09/18	Board of Trustees Development Personnel Governance Finance	7:30pm 5:30pm 5:30pm 6:15pm 6:15pm
Thurs-Fri	09/18-09/19	Senior Class Retreat	
Tuesday	09/23	Professional Development Early Release	12:00pm
Wednesday	09/24	Library Committee Work Night	4:00pm-7:00pm

ANNOUNCEMENTS

News from the Library Committee

The Library Committee is holding a **Work Night** on **Wednesday Sept. 24th from 4-7pm** to continue the scanning of our materials to support the new automatized checkout system. Parent volunteers are welcome to attend for as little or as long as you are able. Please email Bev Bruce at bbruce@sscps.org if you would like to volunteer. "More hands make the work light" is our motto!

The Computer Graphics Workshop has 2 rulers that are 76 inches in length, 12 inches high and show increments in 1/16's. It is basically a 12 inch ruler blown up to 6 ft. They are made of vinyl like a banner. Great for over your teacher's white board and will help with math problems. The pod that comes up with the best reason why they should have one, in a written paragraph, wins. Please submit your entry by October 1st to Christine in the Art Room.

From Level I

Level I would like a Sandbox! Can you help us? We are looking for a couple of handy parents who can come in, take a look at our space and let us know what supplies we need to build a sandbox outside. We have a group of high school students who will help with the building but we also need some parents to help supervise them. If you can help us, please email Kassandra at ksullivan@sscps.org or Melissa at mfreitas@sscps.org. Thank you!

FROM THE PARENTS ASSOCIATION

Save the date for our **6th Annual Harvest Walk/Run** on Saturday October 18th at Wompatuck State Park. Volunteer if you'd like, or sign up the family for an SSCPS discounted rate of \$40. You will receive two tech t-shirts with your SSCEF (educational fund) donation and a wonderful experience for all. We have many gracious vendors who make donations for the post-race fun. If you have friends outside the school who would like to participate in the Harvest Walk/Run please forward this link. www.harvestrun.racewire.com

School Council – Volunteers Needed

Consisting of six parents, six teachers, three students, and the Principals, the Council provides advice to the Principals and the Executive Director on budget, policy, curriculum, school evaluation, schedules, and discipline matters, while also keeping the Board of Trustees informed of developments in the School.

Any parent interested in serving on the School Council should contact Steve Hillson, the Parents Association Chair, at: steve.hillson@gmail.com

WEEKLY UPDATES ARE EMAILED AND POSTED ON OUR WEBSITE AT WWW.SSCPS.ORG EVERY WEDNESDAY – TO RECEIVE A PAPER COPY PLEASE CONTACT PAM ALGERA EXT. 103 OR EMAIL PALGERA@SSCPS.ORG

6th, 7th and 8th Graders
Italy Trip, April 2015
See Venice, Florence, and Rome!

Join Us!
Sign up by 9/30 to lock in your spot



We are fortunate enough to be planning our journey through EF Education, a global education company with over 50 years of abroad programming experience. They will provide an amazing educational experience, the best safety and support and, above all, the best value on the price of the tour.

We are estimating a high number of enrollments for this trip! With **just \$95**, you will secure your place and will be well on your way to the experience of a lifetime. **Prices may increase October 1** so lock in **your spot now!** Make sure to enroll now on our very own tour website:

www.eftours.com/1550293WW

Again, I am so very excited at the prospect of you joining our group of travelers! If you have any questions at, please do not hesitate to contact me at coverlee@sscps.org.

Claire

Claire Overlee

South Shore Charter Public School



Dear SSCPS Families,

It's been a great pleasure being a part of such a wonderful school. The staff has been very kind and helpful in every way imaginable. The students have been cooperative and receiving of the lessons that I've taught. This letter is in regards to forming an SSCPS Before School Chorus comprised of students from Level 3-4 on **Tuesdays** from 7:20am-8:10am.

Learning to sing sophisticated music in a group setting is a great way for students to grow to express his or herself in a new way; musically. These vocal musicians will be singing in a choral setting. Knowing that they each have a specific part to play in making the music come together as a whole, and hearing how the personal voice adds to the group will feed their desire to learn and be a part of a group even more.

If you are interested in participating in the chorus program, please fill out the application on the back and bring it to the front desk as soon as possible. If you have any questions, feel free to contact me.

Sincerely,

Theron Leonard
Music Teacher
South Shore Charter Public School
tleonard@sscps.org
781.982.4202 x318



South Shore Charter Public School Chorus

Student's Name: _____

Address: _____

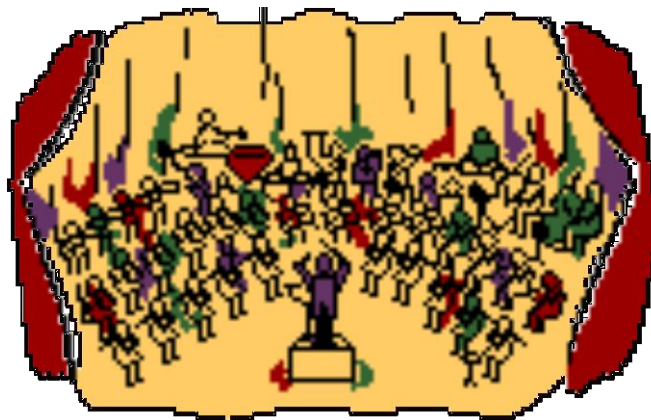
City, Zip: _____

Parent / Guardian's Name: _____

Contact Email Address: _____

Main Telephone Number: _____

Grade: _____



Please return this form to the front desk as soon as possible.

South Shore Charter Public School



Dear SSCPS Families,

It's been a great pleasure being a part of such a wonderful School. The staff has been very kind and helpful in every way imaginable. The students have been cooperative and receiving of the lessons that I've taught. This letter is in regards to forming an SSCPS Before School Band Program on **Mondays** and **Thursdays** from 7:15-8:10.

Learning to play an instrument is a great way for students to grow to express his or herself in a new way; musically. These potential instrumental musicians will be playing in a band setting. Knowing that they each have a specific part to play in making the music come together as a whole, will feed their desire to learn to play even more.

There is a cost for renting an instrument, but not for participating in the program. There is a monthly **Rental-to-Own fee** for the instruments which is \$29.35 for Flutes, Clarinet, Trumpet, and Trombone; and \$45.17 for the Saxophone. The payments go toward the owning of the instrument. Soon, your child will **OWN** their **First Instrument!** The instruments will be from the company, Music and Arts.

If you are interested in participating in the afterschool band program, please fill out the application on the back and bring it to the front desk as soon as possible. If you have any questions, feel free to contact me.

Sincerely,

Theron Leonard
Music Teacher
South Shore Charter Public School
tleonard@sscps.org
781.982.4202 x318



South Shore Charter Public School Afterschool Band

Student's Name: _____

Address: _____

City, Zip: _____

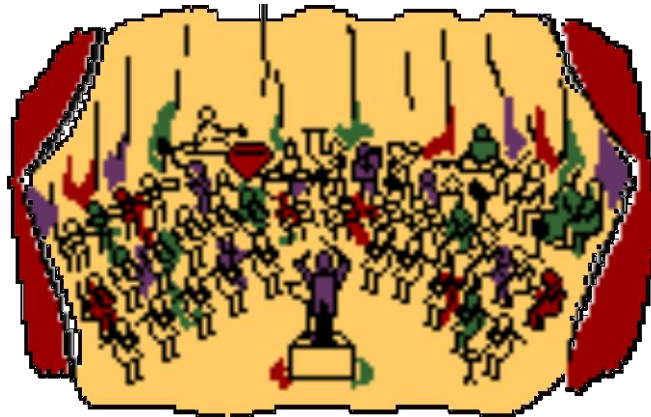
Parent / Guardian's Name: _____

Contact Email Address: _____

Main Telephone Number: _____

Level/Grade: _____

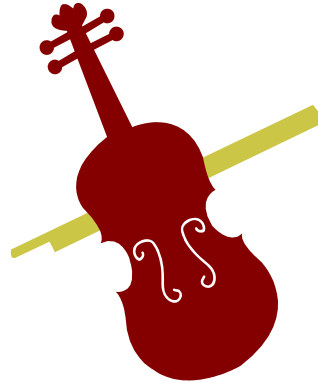
Band Instrument of Choice: _____



Please return this form to the front desk as soon as possible.

Come Play Strings!

Violin, Viola, and Cello Lessons



Lessons available right here at South Shore Charter Public School with Kevin Burokas from the Quincy Symphony

1/2 hour, 45 minute, or 1 hour timeslots before or after school

Contact Kevin Burokas in high school classroom 103 or via email at: kburokas@sscps.org for more info!

Come and learn about the most beautiful and dynamic instruments in the orchestra!



We serve creative cuisine and worthy causes.

Present this certificate to your server and your cause will receive
15% of your total purchase* every Tuesday during September 2014
Valid for Dine in or Take out

Name of Organization:

South Shore Charter Public School

Valid:
September 2nd, 9th, 16th, 23rd & 30th 2014

*Excludes Alcohol, Tax and Gratuity



111 Pond Street Main • Norwell • 781-616-6160



Harvest Run

5K ROAD RACE - FITNESS WALK

Saturday, October 18, 2014

Wompatuck State Park
Hingham, MA

Would you like your company logo on this year's Harvest Run event t-shirt? Sponsorship options are still available!

For more information visit www.sscps.org or contact
Denise Demaggio at ddemaggio@sscps.org or #617-653-8246

Race Schedule:

9:00 - 10:45: Registration and t-shirt pick-up

11:00: The Harvest Run begins!

Refreshments provided after the race

Individual registration opening soon

Family discount is available for SSCPS students, staff, and their immediate families. Sign up at the back to school picnic !

All funds raised will be used to develop outdoor spaces for health and recreation at the South Shore Charter Public School.



Harvest Run

5K ROAD RACE - FITNESS WALK

Saturday, October 18, 2014

Wompatuck State Park
Hingham, MA

SSCPS FAMILY REGISTRATION

Family Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone#: _____

E-Mail: _____

For office use only

Cash/Check # \$ Date Received

Waiver Must Be Read and Understood:

I know that running is a potentially hazardous activity. I should not enter or run this event unless I am medically able and properly trained.

I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this race including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application, I, for myself and anyone entitled to act on my behalf, waive and release South Shore Charter Educational Foundation, South Shore Charter Public School and the town of Hingham, MA, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event.

Signature : _____ Date: _____

Individual Names	Runner/Walker Up to 2 runners, unlimited walkers *\$3.50 each additional runner	Age on Race Day Gender M/F	Shirt Size *2 shirts included, \$7.00 each additional *Guaranteed to those who register by September 24th*
1.			
2.			
3.			
4.			
5.			

Pre-Race Number and T-Shirt Pick-Up:

Friday, October 17, 2014 2:00—6:30

Marathon Sports

134 Washington Street, Norwell, MA

Race Schedule:

9:00 - 10:45: Registration and t-shirt pick-up

11:00: The Harvest Run begins!

Refreshments provided after the race

SSCPS Family Registration \$40/family

Fee includes:

2 t-shirts (\$7.00 per additional t-shirt)

2 runners (\$3.50 per additional runner)

unlimited walkers

SSCPS Student Registration

\$15.00/individual student/faculty

All funds raised will be used to develop outdoor spaces for health and recreation at the South Shore Charter Public School.

COMMUNITY SERVICE

Ideas for students of all ages!

Family Activities

Community service is a great thing to do with the whole family! Here are some ideas to do together:

- plant a tree
- pick up litter at your favorite park or hike
- visit elderly neighbors

For The Younger Bunch

The lower level requirements are by the act rather than the hour.

- donate used toys
- help someone without being asked
- read to kindergarteners

Help Our School

Our school relies on fundraising and volunteering. Upcoming events include the Harvest Run 5K in the fall, The Annual Auction, and more!

Local Service Opportunities

SSYMCA

The Quincy YMCA is offering volunteer opportunities for youth ages 7 to 14 years old. For more info please contact Courtney at cgray@ssymca.org

Quincy Branch YMCA

79 Coddington Street

Quincy, MA 02169

(617) 479-8500 X4714

Soule Homestead Education Center Junior Volunteer Program

AGES 10-15

As a Jr. Volunteer you can:

Learn how to care for the farm animals

Prepare and decorate for special events

Provide assistance in gardens, fields, wetlands

Help maintain walking trails

Engage in prep work for children's programs

For more information about JV's contact the Children's Educator in Middleborough, Laurie at 508.947.6744 or email at educator@soulehomestead.org

If you have leads for community service opportunities you'd like to share please email me the details at adrienne.mcdougall@yahoo.com.

Holly Hill Farm & Friends

9/16/2014 FOR IMMEDIATE RELEASE:

Contact Info:

Friends of Holly Hill Farm

Holly Hill Farm

236 Jerusalem Road, Cohasset, MA 02025

www.hollyhillfarm.org 781-383-6565

FHHF contact: jbelberhollyhill@hotmail.com

September 16 Chipotle Fundraiser 5 PM – 8 PM

Make dinner a selfless act by supporting Friends of Holly Hill Farm at Chipotle. Visit the Chipotle at Derby Street Shoppes on Tuesday, September 16 from 5 PM to 8 PM and bring or show the flyer on your smartphone (flyer available at www.hollyhillfarm.org) or tell the cashier and 50% of the proceeds will go to the Friends of Holly Hill Farm. Holly Hill Farm. 236 Jerusalem Road, Cohasset. [781-383-6565](tel:781-383-6565). www.hollyhillfarm.org

October 3, October 6 & 7 Photos on the Farm

Book your session today! Local photographer Annemarie DeSmet of Mimi & Co. Photography will be offering limited edition sessions at Holly Hill Farm. Fabulous for holiday gifts – these charming photos of your preschoolers and little ones will be treasured for generations. Contact Annemarie@mimiandcophoto.com 425-829-2094 for reservations and details. Holly Hill Farm. 236 Jerusalem Road, Cohasset. [781-383-6565](tel:781-383-6565). www.hollyhillfarm.org

October 4 7th Annual Discover the Woods Run 10 AM Registration: \$30 adults \$15 kids 12 & younger

Our annual Discover the Woods Run is now part of the South Shore Trail Series. The course winds through the woods that surround the Farm's 3 acres of organically grown vegetables, flowers, and herbs, past open meadows, grassy field edges, a brook, and a pond. Trail conditions are a combination of grass, woodland paths, wooden bridges and mud! 5K trail run begins at 10; 1 mile fun run/walk begins at 11. Register at www.hollyhillfarm.org or <http://www.southshoretrailseries.org/>. Holly Hill Farm. 236 Jerusalem Road, Cohasset. [781-383-6565](tel:781-383-6565). www.hollyhillfarm.org

October 25 Dance your Burrito Off!

Save the date! Learn to Contra Dance and enjoy a Chipotle Burrito at Holly Hill Farm. We are still pulling together the plans for an evening of dance, food and fun in the Tomato Barn and will share the details soon, but plan to join us! Holly Hill Farm. 236 Jerusalem Road, Cohasset. [781-383-6565](tel:781-383-6565). www.hollyhillfarm.org

November 1 Harvest Dinner & Auction 6 PM

Mark your calendars to join us for the annual Harvest Dinner and Auction. Our cozy greenhouse, decked with twinkling lights, sets the stage for a delicious dinner and auction to benefit the *Friends of Holly Hill Farm* educational programs. Details to follow. Holly Hill Farm. 236 Jerusalem Road, Cohasset. [781-383-6565](tel:781-383-6565). www.hollyhillfarm.org

November 29 6th Annual Holly Day Fair 11 AM – 3 PM

Kick off the holiday season with a visit to our Holly Day Fair. Bring your list and check it twice! Local artisans display their crafts in the greenhouse. Pick up unique gifts for everyone on your list. Holly Hill swags and a wreath making workshop provide the holiday decor for your home. Children's activities keep young ones occupied while you shop. And food... great food is never in short supply at Holly Hill Farm! See you at the Farm! Holly Hill Farm. 236 Jerusalem Road, Cohasset. [781-383-6565](tel:781-383-6565). www.hollyhillfarm.org

January 1 – Annual New Year's Day Walk with Naturalist Steve Ivas

Celebrate the New Year at Holly Hill Farm. This walk has become an annual tradition for many families and we

invite you to join us. Naturalist Steve Ivas will provide a guided tour along the trails. Holly Hill Farm. 236 Jerusalem Road, Cohasset. [781-383-6565](tel:781-383-6565). www.hollyhillfarm.org

Farm Stand Hours

Thru mid-October Wednesday, Saturday and Sunday 11 AM -6 PM

As you adjust to the new autumn routine, be sure to include a regular visit to Holly Hill's Farm Stand. We are open every Wednesday, Saturday and Sunday from 11-6 through mid-October. Our organic tomatoes are harvesting late this year, and are now in abundance at the Farm Stand, providing a taste of summer to those of us not yet ready to let the season go! Holly Hill Farm. 236 Jerusalem Road, Cohasset. [781-383-6565](tel:781-383-6565). www.hollyhillfarm.org

Holly Hill Farm Happenings

Do you know of a school, PTO, organization, blogger, writer, newsletter coordinator or media outlet that would be interested in keeping updated on the happenings at Holly Hill Farm? With the start of the new academic year, we are updating our contact list and welcome any new additions to our growing community. Holly Hill Happenings is sent weekly via email and is designed for easy sharing. Organizations utilizing specific services like PeachJar can be accommodated. Contact friendsofhollyhillfarm@gmail.com.

Levels I through IV

BOKS (Before-School Fitness Program)

Organized and run by SSCPS parents Janet Daley and Iris Mahegan with support from Justina Pettinelli, Julie Burke, Caitriona Hollowed and Priscilla Kelly. The program is inspired by the Reebok Foundation's BOKS program; all the fitness leaders have been trained by Reebok. This is a no cost before-school fitness program being offered to any child in Level I through Level IV. In order to provide the best program to the children there is a limit of 40 participants, if more applications are received than spots there will be a lottery for participation. All accepted participants will be notified by email. The schedule for the program is Monday and Wednesday for Level I & II, Tuesday and Thursday for Level III & IV and Friday morning for all levels with Fridays being "game day". BOKS is held in the PE space with a very sharp start time of 7:15 (**drop off** begins at 7:10) and an end time of 8:00, the trainers escort all the children to the back door of the school. The Fall session will run from September 29th, 2014 through December 19th, 2014.

In order for your child(ren) to participate please fill out the below information as well as the attached application and place it in the envelop at the front desk labeled "BOKS" absolutely NO later than Tuesday, September, 23th. If **all** the forms are not completed your child(ren) will not be able to participate, this is to avoid liability issues that may rise.

The purpose of BOKS is to stimulate the mind by movement before the school day begins. Involvement in this program requires a commitment of the three days a week by both the parent/guardian of each child as well as the children for the duration of the 12 week session.

ALL requested information is required - Complete a separate form for each child.

PLEASE PRINT CLEARLY

I would like my child to participate in the Winter BOKS Morning Fitness Program

Childs' Name: _____ Pod Teacher: _____

Parent(s)/Guardian(s) Email: _____

Parent(s)/Guardian(s) Signature: _____

Home Phone: _____ Mobile Phone: _____

Shout Out

BOKS Trainer Volunteers

The BOKS program is looking for more adult volunteers to help during the fitness program. In order to be a trainer you will need to attend a Rebook training session. There are perks that go along with doing the training including a one day 50% discount pass.

The schedule for the program is Monday and Wednesday for Level I & II, Tuesday and Thursday for Level III & IV and Friday morning for all levels with Fridays being "game day". BOKS is held in the PE space with a very sharp start time of 7:15 (**drop off** begins at 7:10) and an end time of 8:00. The Fall session will run from September 29th, 2014 through December 19th, 2014.

Historically there have been a minimum of two twelve week sessions and a maximum of three sessions.

Available Training Sessions for new Trainers

September 16, 2014 10:00am – 2:00pm

September 17, 2014 4:00pm – 8:00pm

October 14, 2014 10:00am – 2:00pm

October 15, 2014 4:00pm – 8:00pm

Available Training Session for returning Trainers

October 16, 2014 6:00pm – 8:30pm

This is an extremely rewarding program for the children as well as the parent volunteers and all help will be appreciated.

There are a few opportunities for High School students to volunteer. However for those that wish to earn some community service hours by helping must understand this is a serious program. Their commitment must include active participation and genuine help.

All interested volunteers please contact Janet Daley at jemsdaley@gmail.com for more information.



Nonverbal Learning Disability: Characteristics and Treatment

Presented by:
Ellen Keefe, MS, CCC-SLP
Sheryl Man, MS, OTR/L

Wednesday, September 17th, 2014
7-8:30 p.m. Weymouth Location 1st Floor
\$25

When

Wednesday September 17, 2014
from 7:00 PM to 8:30 PM EDT
7-8:30 pm
[Add to Calendar](#)

Where

South Shore Therapies
163 Libbey Industrial Parkway
First Floor
Weymouth, Ma 02189

[Driving Directions](#)

Some of the characteristics of Nonverbal Learning Disability are:

- Difficulty understanding body language/facial expression
- Inability to grasp the "Big Picture"
- Concrete Literal Thinking
- Decreased coordination and organization
- Difficulty writing and drawing
- Problems with math and reading
- Poor self esteem

Join Ellen Keefe, MS, CCC-SLP and Sheryl Man MS, OTR/L for a discussion that will provide you with an understanding of the physical, language and social characteristics of NVLD. In addition, you will learn great strategies to help you boost your child's social and higher level language skills.



[Register Now!](#)



Dear Parent/Guardian:

Children need healthy meals to learn. **South Shore Charter Public School** offers healthy meals every school day. Breakfast costs **\$1.75**; lunch costs **\$3.25**. Your children may qualify for free meals or for reduced price meals. Reduced price is **\$0.30** for breakfast and **\$0.40** for lunch.

1. *Do I need to fill out an application for each child?* No. **Complete only one Free and Reduced Price School Meals Application for all students in your household.** We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to: **Charlene Evans, Food Services Coordinator, 781-982-4202.**
2. *Who can get free meals?* All children in households receiving benefits from MA SNAP, MA TAFDC or the Food Distribution Program on Indian Reservations, can get free meals regardless of your income. Also, your children can get free meals if your household's gross income is within the free limits on the Federal Income Eligibility Guidelines.



If you have received a NOTICE OF DIRECT CERTIFICATION for free meals, do not complete the application. But do let the school know if any children in your household are not listed on the Notice of Direct Certification letter you received.

3. **CAN FOSTER CHILDREN GET FREE MEALS?** Yes, foster children that are under the legal responsibility of a foster care agency or court, are eligible for free meals.
4. *Can homeless, runaway, and migrant children get free meals?* Yes, children who meet the definition of homeless, runaway, or migrant are eligible for free meals. If you believe children in your household meet these descriptions and haven't been told your children will get free meals, please call or e-mail **Angie Pepin, 7-12 Principal, 781-982-4202 or aepin@sscps.org.**
5. **WHO CAN GET REDUCED PRICE MEALS?** Your children can get low cost meals if your household income is within the reduced price limits on the Federal Eligibility Income Chart, shown on this application.
6. **SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE APPROVED FOR FREE MEALS?** No, but please read the letter you got carefully and follow the instructions. Call the school at **781-982-4202** if you have questions.
7. **MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT ANOTHER ONE?** Yes. Your child's application is only good for that school year and for the first few days of this school year. You must send in a new application unless the school told you that your child is eligible for the new school year.
8. **I GET WIC. CAN MY CHILD(REN) GET FREE MEALS?** Children in households participating in WIC may be eligible for free or reduced price meals. Please send in an application.
9. *Will the information I give be checked?* Yes and we may also ask you to send written proof.
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 and reduced price meals if the household income drops below the income limit.
11. *What if I disagree with the school's decision about my application?* You should talk to school officials. You also may ask for a hearing by calling or writing to: **Alicia Savage at 781-982-4202 or email asavage@sscps.org or by mail to 100 Longwater Circle, Norwell, MA 02061.**

12. *May I apply if someone in my household is not a U.S. citizen?* Yes. You or your child(ren) do not have to be U.S. citizens to qualify for free or reduced price meals.
13. *Who should I include as members of my household?* You must include all people living in your household, related or not (such as grandparents, other relatives, or friends) who share income and expenses. You must include yourself and all children living with you. If you live with other people who are economically independent (for example, people who you do not support, who do not share income with you or your children, and who pay a pro-rated share of expenses), do not include them.
14. *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.
15. *We are in the military. do we include our housing allowance as income?* If you get an off-base housing allowance, it must be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income.
16. *My spouse is deployed to a combat zone. is her combat pay counted as income?* No, if the combat pay is received in addition to her basic pay because of her deployment and it wasn't received before she was deployed, combat pay is not counted as income. Contact your school for more information.
17. *My family needs more help. Are there other programs we might apply for?* To find out how to apply for MA SNAP or other assistance benefits, contact your local assistance office or call the MA SNAP Hotline **1-866-950-3663**

If you have other questions or need help, call **781-982-4202x106**

Si necesita ayuda, por favor llame al teléfono: **781-982-4202x106**

Si vous voudriez d'aide, contactez nous au numero: **781-982-4202x106**

Sincerely,

Kristine Bingham
Director of Finance

“The U.S. Department of Agriculture prohibits discrimination against its customers, employees, and applicants for employment on the basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html , or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity employer.

SHARING INFORMATION WITH MEDICAID/SCHIP

Dear Parent/Guardian:

If your children get free or reduced price school meals, they may also be able to get free or low-cost health insurance through Medicaid or the State Children's Health Insurance Program (SCHIP). Children with health insurance are more likely to get regular health care and are less likely to miss school because of sickness.

Because health insurance is so important to children's well-being, *the law allows us to tell Medicaid and SCHIP that your children are eligible for free or reduced price 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 Free and Reduced Price School Meals Application does not automatically enroll your children in health insurance.

If you do not want us to share your information with Medicaid or SCHIP, fill out the form below and send in (Sending in this form will not change whether your children get free or reduced price meals).

☐

No! IDO NOT want information from my Free and Reduced Price School Meals Application shared with Medicaid or the State Children's Health Insurance Program.

If you checked no, fill out the form below to ensure that your information is NOT shared for the child(ren) listed below:

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 **Kristine Bingham** at 781-982-4202x106 or e-mail at kbingham@sscps.org

Return this form to: **SSCPS, 100 Longwater Circle, Norwell, MA 02061.**

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.

- ☐ Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **Title I Program**.
- ☐ Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **SSYMCA Afterschool Childcare Program**.
- ☐ Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **SSCPS Athletic & Enrichment Programs**.

If you checked yes to any or all of the boxes above, fill out the form below to ensure that your information is shared for the child(ren) listed below. **Your information will be shared only with the programs you checked.**

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 **Kristine Bingham** at 781-982-4202x106 or e-mail kbingham@sscps.org

Return this form to: **Kristine Bingham** at **SSCPS, 100 Longwater Circle, Norwell, MA 02061.**



If your child is eligible for free or reduced school meals, your child may also be eligible for
free or low cost health insurance
through MassHealth.

To learn more call: 1-800-841-2900

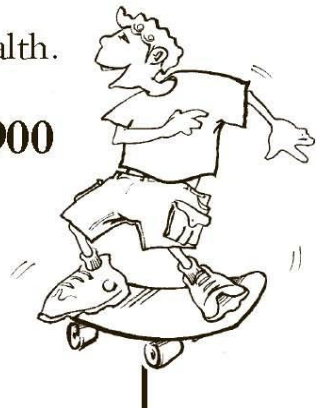
MassHealth



Si su niño es eligible para almuerzo gratis o reducido, su niño pueda ser eligible para
seguro de salud gratis o de bajo costo
por medio de MassHealth.

Para saber mas, llame al: 1-800-841-2900

*covering
Kids*





MASSACHUSETTS FREE AND REDUCED PRICE SCHOOL MEALS HOUSEHOLD APPLICATION

SCHOOL YEAR 2014-2015

If you have received a NOTICE OF DIRECT CERTIFICATION from the school district for free meals, **do not** complete this application. But **do** let the school know if any children in the household are not listed on the **Notice of Direct Certification** letter you received.

PART 1. ALL HOUSEHOLD MEMBERS List all household members including children seeking school meals, siblings and both parents of children living in home. Also, include other relatives and friends living in home if you live as a single economic unit. (See instructions- Q.13)

NAME OF ALL HOUSEHOLD MEMBERS (First, Middle Initial, Last)	NAME OF SCHOOL CHILD ATTENDS	CHECK IF A FOSTER CHILD (LEGAL RESPONSIBILITY OF WELFARE AGENCY OR COURT) * IF ALL CHILDREN LISTED BELOW ARE FOSTER CHILDREN, SKIP TO PART 5.	CHECK IF NO INCOME
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

PART 2. BENEFITS- MA SNAP OR MA TAFDC

IF **ANY** MEMBER OF YOUR HOUSEHOLD RECEIVES **MA SNAP** or **MA TAFDC** benefits, PROVIDE THE AGENCY IDENTIFICATION NUMBER* LOCATED ON THE DEPARTMENT OF TRANSITIONAL ASSISTANCE (DTA) BENEFIT LETTER. SKIP TO PART 5 AND SIGN THIS FORM IF YOU HAVE PROVIDED AN AGENCY ID NUMBER.

AGENCY ID: _____ * Do not provide EBT card number.

PART 3. HOMELESS, MIGRANT, RUNAWAY

IF ANY CHILD YOU ARE APPLYING FOR IS HOMELESS, A RUNAWAY, OR MIGRANT, CHECK THE APPROPRIATE BOX AND CALL **Angie Pepin, 781-982-4202x102**

HOMELESS ☐ RUNAWAY ☐ MIGRANT ☐

PART 4. TOTAL HOUSEHOLD GROSS INCOME (BEFORE DEDUCTIONS). List all income on the same line as the person who receives it. Check the box for how often it is received. RECORD EACH INCOME ONLY ONCE. DO NOT INCLUDE MONEY RECEIVED FROM MA SNAP OR MA TAFDC.

1. NAME (LIST ONLY HOUSEHOLD MEMBERS WITH INCOME)	2. GROSS INCOME AND HOW OFTEN IT WAS RECEIVED															
	Earnings from work before deductions.	Weekly	Every 2 Weeks	Twice Monthly	Monthly	Welfare, child support, alimony	Weekly	Every 2 Weeks	Twice Monthly	Monthly	Pensions, retirement, Social Security, SSI, VA benefits	Weekly	Every 2 Weeks	Twice Monthly	Monthly	All other income (you must indicate how much and how often)
(Example) Jane Smith	\$200	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$150	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$

PART 5. SIGNATURE AND LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER (ADULT MUST SIGN)

A parent or caretaker adult must sign the application (see Use of Information Statement on the back of this page). I certify (promise) that all information on this application is true and that all income is reported. I understand that the school will get Federal funds based on the information that I give. I understand that school officials may verify (check) the information. I understand that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted. An adult household member must sign the application. If Part 4 is completed, the adult signing the form also must list the last 4 digits of his or her Social Security Number or mark the "Check here if you do not have a Social Security Number" box. See Use of Information Statement on the back of this page.

Sign here: _____ Print Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone Number: _____ Cell Phone Number: _____

Last four digits of Social Security Number *** - * * - ____ ☐ Check here if you do not have a Social Security Number

PART 6. CHILDREN'S ETHNIC AND RACIAL IDENTITIES (OPTIONAL)

Choose one ethnicity:

Choose one or more (regardless of ethnicity):

<input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino	<input type="checkbox"/> Asian <input type="checkbox"/> White	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander	<input type="checkbox"/> Black or African American
--	--	---	--

DO NOT FILL OUT THIS PART. THIS IS FOR SCHOOL USE ONLY.

Annual Income Conversion: Weekly x 52, Every 2 Weeks x 26, Twice A Month x 24, Monthly x 12

Only annualize income if there are multiple pay frequencies

Total Income: _____ Per: ☐ Week, ☐ Every 2 Weeks, ☐ Twice A Month, ☐ Month, ☐ Year Household size: _____

Dual Eligibility: Foster child(ren) – Free _____ Non-foster child(ren) – Free _____ Reduced _____ Denied _____

Categorical Eligibility: _____ Date Withdrawn: _____ Eligibility: Free _____ Reduced _____ Denied _____ Reason: _____

☐ Check if this is an **error prone application** – utilize for verification standard sample size – see eligibility manual for instructions.

Determining Official's Signature: _____ Date: _____

Confirming Official's Signature: _____ Date: _____

Verifying Official's Signature: _____ Date: _____

Your children may qualify for free or reduced price meals if your household income falls at or below the limits on this chart.

Use of Information Statement: This explains how we will use the information you give us.

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, 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), Temporary Assistance for Needy Families (TANF) Program 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.

FEDERAL ELIGIBILITY INCOME CHART			
School Year 2014-2015			
Household size	Yearly	Monthly	Weekly
1	\$21,590	\$1,800	\$416
2	\$29,101	\$2,426	\$560
3	\$36,612	\$3,051	\$705
4	\$44,123	\$3,677	\$849
5	\$51,634	\$4,303	\$993
6	\$59,145	\$4,929	\$1,138
7	\$66,656	\$5,555	\$1,282
8	\$74,167	\$6,181	\$1,427
Each additional person:	+7,511	+626	+145

Non-discrimination Statement: This explains what to do if you believe you have been treated unfairly. “The U.S. Department of Agriculture prohibits discrimination against its customers, employees, and applicants for employment on the basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual’s income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#), found online at [http:// www.ascr.usda.gov/complaint_filing_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html) , or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish).

USDA is an equal opportunity employer.

Breakfast Order Form
Breakfast for the Month of October, 2014
Due to the office by 3:00 pm, ***Tuesday**, September 23, 2014

Student Name _____

Pod Teacher/Advisor _____ Grade _____

Please **CHECK** off the day breakfast will be ordered.

Week of ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday
9/29 – 10/3

Week of ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☒ Friday
10/6 – 10/10

Week of ☒ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday
10/13 – 10/17

Week of ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday
10/20 – 10/24

Week of ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday
10/27 – 10/31

Number of Breakfasts ordered _____ X \$1.75

Less credit due

Total Amount Enclosed

\$ _____

Cash or Checks may be made out to SSCPS.

Lunch Order Form
Lunch for the Month of October, 2014
Due to the office by 3:00 pm, ***Tuesday**, September 23, 2014

Student Name _____

Pod Teacher/Advisor _____ Grade _____

Please **CHECK** off the day lunch will be ordered.

Week of ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday
9/29 – 10/3

Week of ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☒ Friday
10/6 – 10/10

Week of ☒ Monday ☐ Tuesday ☒ Wednesday ☐ Thursday ☐ Friday
10/13 – 10/17

Week of ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday
10/20 – 10/24

Week of ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday
10/27 – 10/31

Number of Meals ordered _____ X \$3.25

Less credit due

Total Amount Enclosed

\$ _____

Cash or Checks may be made out to SSCPS.

Choice of 1% milk, skim milk or orange juice is included with the purchase of a meal or can be purchased separately for 30 cents.

Please note: If your child has forgotten lunch, a cheese sandwich will be provided at the cost of \$2.50. A note from the office will go home that afternoon for reimbursement.



South Shore Charter School
OCTOBER, 2014

Breakfast

Monday	Tuesday	Wednesday	Thursday	Friday
29 Cereal Fruit Juice Milk	30 3.6 oz WW Muffin Fruit Juice Milk	1 3.6 oz. WW Muffin Orange Juice Fruit Milk	2 WG Cinnamon Bun Orange Juice Fruit Milk	3 Raisin Bran WW Blueberry Waffle Grahams Orange Juice Fruit Milk
6 Toasty O's WW Apple Cinnamon Waffles Orange Juice Fruit Milk	7 WW Croissant w/Jelly Orange Juice Fruit Milk	8 3.6 oz. WW Chocolate Muffin Orange Juice Fruit Milk	9 Raisin Bran Orange Juice Fruit Milk	10 No School Prof. Dev. DAY
13 COLUMBUS DAY	14 Honey Wheat Bagel w/Jelly Orange Juice Fruit Milk	15 Toasty O's Orange Juice Fruit Milk	16 WG Cinnamon Bun Orange Juice Fruit Milk	17 3.6 oz. WW Apple Muffin Orange Juice Fruit Milk
20 3.6 oz. WW Apple Muffin Orange Juice Fruit Milk	21 3.6 oz. WW Banana Muffin Orange Juice Fruit Milk	22 WW Croissant w/Jelly Orange Juice Fruit Milk	23 3.6 oz. WW Banana Muffin Orange Juice Fruit Milk	24 3.6 oz. WW Chocolate Muffin Orange Juice Fruit Milk
27 Toasty O's WW Apple Cinnamon Waffles Orange Juice Fruit Milk	28 Cinnamon Toast Crunch Orange Juice Fruit Milk	29 3.6 oz. WW Muffin Orange Juice Fruit Milk	30 WG Cinnamon Bun Orange Juice Fruit Milk	31 2 oz. Cereal Fruit Orange Juice Milk

* All Meals include Choice of 1% or Skim Milk.

* Complies with NSLP Regulations

ALL MENUS ARE SUBJECT TO CHANGE

***Before placing your order, please inform the school if you have a food allergy!**



SOUTH SHORE CHARTER SCHOOL K-8
OCTOBER, 2014

Lunch

Monday	Tuesday	Wednesday	Thursday	Friday
Sept. 29 Sweet & Sour Meatballs Ziti Green Beans Mandarin Oranges Milk	Sept. 30 Chicken Stir Fry Brown Rice Corn Pineapple Chunks Milk	1 Chicken Parmesan w/Ziti Broccoli Peaches Milk	2 Mexican Chicken Wrap Sweet Potato Fries w/Ketchup Apple Milk	3 Nachos w/Ground Beef Southwestern Beans Watermelon Chunks Milk
6 Mozzarella Sticks w/Marinara Sauce Green Beans Baked Sliced Apples Milk	7 Beef Hot Dog on WW Roll Ketchup Baked Beans Apple Milk	8 BBQ Chicken on Bun Potato Wedges w/ Ketchup Plums Milk	9 Sloppy Joe on WW Bun Broccoli Banana Milk	10 <div style="text-align: center; color: red; font-weight: bold;"> No School Prof. Dev. Day </div>
13 <div style="text-align: center; color: orange; font-weight: bold;"> COLUMBUS DAY </div>	14 Ziti & Meatballs Broccoli Whole Wheat Roll Apple Juice Milk	15 <div style="text-align: center; color: red; font-weight: bold;"> EARLY RELEASE </div>	16 Chicken Quesadilla Spanish Rice Green Beans Orange Milk	17 Chicken Caesar Salad Wrap Cucumber Pears Milk
20 Chicken Tenders w/Ketchup Green Beans Peaches Honey Wheat Dinner Roll Milk	21 Sweet & Sour Chicken Brown Rice Broccoli Pineapple Chunks Milk	22 “Breakfast for Lunch” Pancakes & Syrup w/Sausage Patty Potato Wedges Grapes Milk	23 Chicken Alfredo w/Ziti Broccoli Applesauce Milk	24 Low Fat Cheese Pizza Carrots Banana Milk
27 Turkey & Gravy Corn Apple Honey Wheat Dinner Roll Milk	28 American Chop Suey Carrots Banana Whole Wheat Roll Milk	29 Hamburger on WW Bun w/Ketchup Baked Beans Baked Apple Slices Milk	30 Jamaican Beef Patty Green Beans Apple Milk	31 Chicken Parmesan w/Ziti Broccoli Peaches Milk

* All Meals include Choice of 1% or Skim Milk.

* Complies with NSLP Regulations

ALL MENUS ARE SUBJECT TO CHANGE

*Before placing your order, please inform the school if you have a food allergy!



SOUTH SHORE CHARTER SCHOOL 9-12

OCTOBER, 2014

Lunch

Monday	Tuesday	Wednesday	Thursday	Friday
Sept. 29 Sweet and Sour Meatballs Ziti Green Beans Mandarin Oranges Milk	Sept. 30 Chicken Stir Fry Brown Rice Corn Pineapple Chunks Milk	1 Chicken Parmesan w/Ziti Broccoli Peaches Milk	2 Mexican Chicken Wrap Sweet Potato Fries w/Ketchup Apple Orange Juice Milk	3 Nachos w/Ground Beef Southwestern Beans Watermelon Chunks Milk
6 Mozzarella Sticks w/Marinara Green Beans Baked Sliced Apples Banana Milk	7 Beef Hot Dog on WW Roll w/Ketchup Baked Beans Apple Peaches Milk	8 BBQ Chicken on Bun Potato Wedges w/ Ketchup Plums Raisins Milk	9 Sloppy Joe on WW Bun Broccoli Carrots Banana Pineapple Chunks Milk	10 No School Prof. Dev. Day
13 COLUMBUS DAY	14 Ziti & Meatballs Broccoli Fruit Cocktail Apple Juice Milk	15 EARLY RELEASE	16 Chicken Quesadilla Spanish Rice Green Beans Orange Peaches Milk	17 Chicken Caesar Salad Wrap Cucumber Pears Apple Juice Milk
20 Chicken Tenders w/Ketchup Green Beans Peaches Honey Wheat Dinner Roll Orange Juice Milk	21 Sweet & Sour Chicken Brown Rice Broccoli Pineapple Chunks Milk	22 “Breakfast for Lunch” Pancakes & Syrup w/Sausage Patty Potato Wedges Grapes Raisins Milk	23 Chicken Alfredo w/Ziti Broccoli Applesauce Honey Wheat Dinner Roll Milk	24 Low Fat Cheese Pizza Sweet Potato Fries Banana Apple Juice Milk
27 Turkey & Gravy Corn Apple WG Cinnamon Roll Orange Juice Milk	28 American Chop Suey Carrots Banana Honey Wheat Dinner Roll Milk	29 Hamburger on WW Bun w/Ketchup Baked Beans Baked Apple Slices Milk	30 Jamaican Beef Patty Spanish Rice Green Beans Peaches Apple Milk	31 Chicken Parmesan w/Ziti Broccoli Peaches Whole Wheat Roll Milk

* All Meals include Choice of 1% or Skim Milk.

* Complies with NSLP Regulations

ALL MENUS ARE SUBJECT TO CHANGE

***Before placing your order, please inform the school if you have a food allergy!**