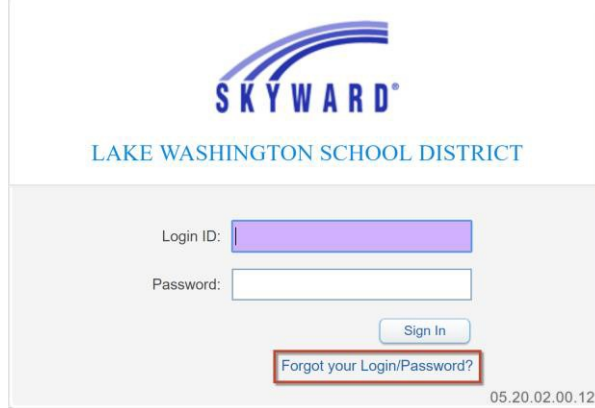


Login to Family Access

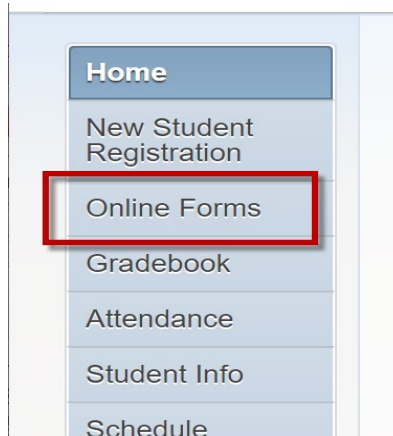
(If you forgot your username and password click on the “Forgot your Login/Password?” link on the Skyward login page. Enter your email address when prompted and you will receive an email with your login (username) and a link to reset your password.)

[Skyward Login Page](#)



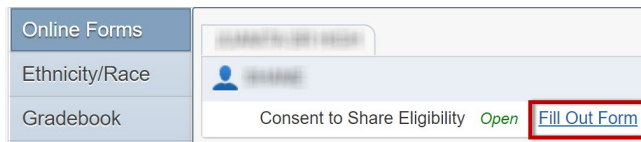
Providing Consent to Share Free & Reduced Eligibility Information

Step 1: Click on **Online Forms** from the selection on the left.



Step 2: Click on **Fill Out Form**

Only applicable students will appear in the survey choices



ASB FEE WAIVER – CONSENT TO SHARE NUTRITION ELIGIBILITY INFORMATION

Step 3: Click **Next**

Consent to Share Eligibility

Consent to Share Nutrition Eligibility Information

Students that qualify for free or reduced meals are eligible to have extracurricular fees such as ASB cards and sports participation fees waived. If your student is already qualified for free and reduced meals for the 2020-21 school year, please complete this consent to share form in order to have fees waived.

If your student is not currently qualified for free and reduced meals but you believe that you are eligible, please complete a free and reduced application.

This form is optional, submitting or not submitting this form will not affect your student's eligibility for free or reduced-price meals.

Consent to Share Nutrition Eligibility Information

1. Consent to Share Nutrition Eligibility Information
2. Complete Consent to Share Eligibility

Next

Close and Finish Later

Step 4A: Select YES or NO to consent to share nutrition eligibility information to be used for fee waiver.

Step 4B: Enter students' first and last name.

Step 4C: Type your name in the parent signature box.

Step 4D: Click "Complete Step 1 and move to Step 2"

CONSENT TO SHARE CHILD NUTRITION PROGRAM ELIGIBILITY INFORMATION

Students that qualify for free or reduced meals are eligible to have extracurricular fees such as ASB cards and sports participation fees waived. If your student is already qualified for free and reduced meals for the 2020-21 school year, please complete this consent to share form in order to have fees waived.

If your student is not currently qualified for free and reduced meals but you believe that you are eligible, please complete a free and reduced application.

This form is optional, submitting or not submitting this form will not affect your student's eligibility for free or reduced-price meals.

You must select YES in the box below and sign the form to allow your eligibility status to be shared for this program benefit:

Select YES to participate	Title of School Program:	How the information will be used:
<input checked="" type="checkbox"/>	Extracurricular activities including Associated Student Body (ASB) fees and Sports Participation fees.	Eligibility for fee waiver

List all school programs with which you that are attending school and that you would like to be considered for additional benefits. Select YES if you want to share your student's free and reduced-price eligibility status:

NO	FIRST NAME	LAST NAME
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		

By typing your name below, you grant permission for your student's eligibility to be shared with LWSD staff or third-party vendors who are associated with the administration or point of sale system of the selected programs above.

Parent Signature

Complete Step 1 and move to Step 2

Step 5: Click on **Submit Consent to Share Eligibility**

Consent to Share Eligibility

Print

Step 2. Complete Consent to Share Eligibility (Required)

By completing Consent to Share Eligibility, you are confirming that the Steps below have been finished. Are you sure you want to complete Consent to Share Eligibility for [Student Name]?

Review Consent to Share Eligibility Steps

Step 1) Consent to Share Nutrition Eligibility Information

Completed [Date]

Guardian Name: [Name]

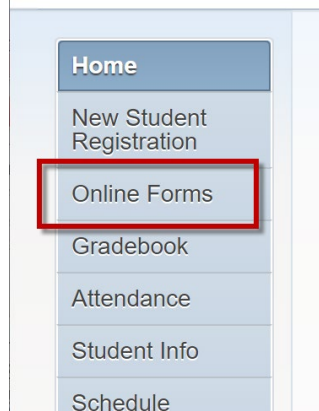
Guardian Address: [Address]

Submit Consent to Share Eligibility

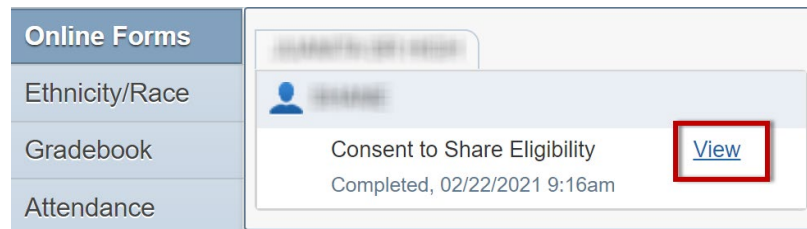
(OPTIONAL)

Making Changes to the Consent Form After You've Submitted

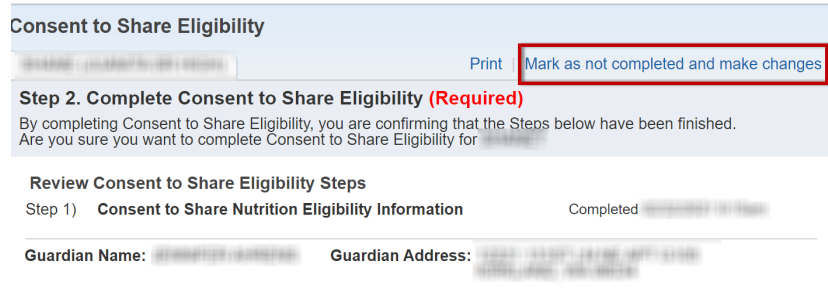
Step 1: Click on **Online Forms**



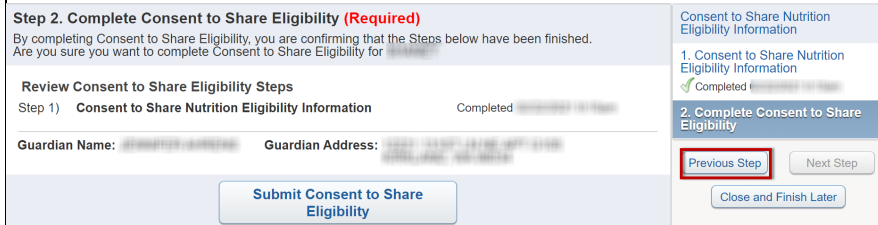
Step 2: Click on **View**



Step 3: Click on **Mark as not completed and make changes**



Step 4: Click on **Previous Step**



ASB FEE WAIVER – CONSENT TO SHARE NUTRITION ELIGIBILITY INFORMATION

Step 5: Click on **Edit Step 1**

CONSENT TO SHARE CHILD NUTRITION PROGRAM ELIGIBILITY INFORMATION

Students that qualify for free or reduced meals are eligible to have extracurricular fees such as ASB cards and sports participation fees waived. If your student is already qualified for free and reduced meals for the 2020-21 school year, please complete this consent to share form in order to have fees waived.

If your student is not currently qualified for free and reduced meals but you believe that you are eligible, please complete a [free and reduced application](#).

This form is optional, submitting or not submitting this form will not affect your student's eligibility for free or reduced-price meals.

You must select YES in the box below and sign the form to allow your eligibility status to be shared for this program benefit:

Select YES to participate	Title of School Program:	How the information will be used:
<input type="checkbox"/>	Extracurricular activities including Associated Student Body (ASB) fees and Sports Participation fees.	Eligibility for fee waiver

List all students living with you that are attending school and that you would like to be considered for additional benefits based on their free and reduced-price eligibility status:

FIRST NAME	LAST NAME

By typing your name below, you grant permission for your student's eligibility to be shared with LWSD or third-party vendors who are associated with the administration or point of sale system of the selected programs above.

Step 4A: Select YES or NO to consent to share nutrition eligibility information to be used for fee waiver.

Step 4B: Enter students' first and last name.

Step 4C: Type your name in the parent signature box.

Step 4D: Click "Complete Step 1 and move to Step 2"

CONSENT TO SHARE CHILD NUTRITION PROGRAM ELIGIBILITY INFORMATION

Students that qualify for free or reduced meals are eligible to have extracurricular fees such as ASB cards and sports participation fees waived. If your student is already qualified for free and reduced meals for the 2020-21 school year, please complete this consent to share form in order to have fees waived.

If your student is not currently qualified for free and reduced meals but you believe that you are eligible, please complete a [free and reduced application](#).

This form is optional, submitting or not submitting this form will not affect your student's eligibility for free or reduced-price meals.

You must select YES in the box below and sign the form to allow your eligibility status to be shared for this program benefit:

Select YES to participate	Title of School Program:	How the information will be used:
<input checked="" type="checkbox"/>	Extracurricular activities including Associated Student Body (ASB) fees and Sports Participation fees.	Eligibility for fee waiver

List all students living with you that are attending school and that you would like to be considered for additional benefits based on their free and reduced-price eligibility status:

NO	FIRST NAME	LAST NAME

By typing your name below, you grant permission for your student's eligibility to be shared with LWSD or third-party vendors who are associated with the administration or point of sale system of the selected programs above.

Step 7: Click **Submit Consent to Share Eligibility**

Consent to Share Eligibility

[SIGNATURE / COMMENTS / PRINT / RESET](#)

[Print](#)

Step 2. Complete Consent to Share Eligibility (Required)

By completing Consent to Share Eligibility, you are confirming that the Steps below have been finished. Are you sure you want to complete Consent to Share Eligibility for **Student**?

Review Consent to Share Eligibility Steps

Step 1) Consent to Share Nutrition Eligibility Information

Completed [View Details](#)

Guardian Name: [Guardian Name](#)

Guardian Address: [Guardian Address](#)

[Submit Consent to Share Eligibility](#)