

# CRESSKILL PUBLIC SCHOOLS

*One Lincoln Drive  
Cresskill, NJ 07626*

*Phone: (201) 227-7791 Ext1206, Fax :( 201) 567-7976*

Dear Parent or Guardian:

All students enrolled in New Jersey public schools must be surveyed. This survey is necessary even if the school does not participate in any of the federally funded Child Nutrition Programs. Please fill out this application as soon as possible, sign it and return it to your child's school.

New Jersey is committed to ensure that all children are enrolled in a health insurance program. Information on your meal application will be shared with NJ Family Care to determine if your children qualify to participate in this state insurance program. If you do **not** wish to share your information with Medicaid or NJ Family Care you must complete and sign the enclosed information sharing form for Medicaid or NJ Family Care, and return it to your child's school. Contact information for NJ Family Care is listed below:

NJ Family Care    [www.njfamilycare.org](http://www.njfamilycare.org)

1-800-701-0710

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Sincerely,



Antoinette Kelly, CPA

Business Administrator/Board Secretary