Pandemic Electronic Benefit Transfer (P-EBT) Summer File Upload

Please submit one or more comma separated value (.csv) files for the "Summer 2021" month selected within the P-EBT File Upload application. These files are collected to enable students' families to qualify for the P-EBT benefits program managed by the Nebraska Department of Health and Human Services (DHHS).

The file(s) should contain all students who qualify for free or reduced-price lunch, and who were in any of these situations:

- 1. Enrolled students who received Round Three P-EBT benefits in the last month of the 2020-21 school year
- 2. Enrolled students who would have received benefits in the last month of the school year but were not eligible based on their school status because they did not experience reduced school attendance
- 3. Enrolled students who are determined newly eligible for free or reduced-price meals during the covered summer period (May 31 August 13, 2021)

Please do not submit any data for students that do not qualify.

Upload your files using the column format below, which is also available in the <u>template file</u> downloaded through the P-EBT File Upload application in the NDE Portal:

Column Number	Name	Data Format	Notes
1	Parent/Guardian First Name	Alphanumeric	Name of primary parent/guardian who will be issued the benefit
2	Parent/Guardian Last Name	Alphanumeric	
3	Primary Language Spoken	Alphanumeric (optional)	Home language spoken by family for contact from DHHS, if available
4	Address Line 1	Alphanumeric	Home address of primary parent/guardian, used to issue benefit
5	Address Line 2	Alphanumeric (optional)	
6	City	Alphanumeric	
7	State	Alphanumeric (2 letters)	
8	Zip Code	Alphanumeric	5 digits only

9	Parent Phone Number	Alphanumeric (xxx-xxx-xxxx) (optional)	Home phone of primary parent/guardian for contact from DHHS, if available
10	Parent E-mail Address	Alphanumeric	Email of primary parent/guardian for contact from DHHS, if available
11	Student First Name	Alphanumeric	The eligible student, as described above
12	Student Last Name	Alphanumeric	
13	Student Birth Date	Alphanumeric (yyyy-mm-dd or m/d/yyyy)	Used for benefit issuances
14	NDE Student ID	Numeric (10 digits)	NDE's unique state student ID
15	NDE School Agency ID	Alphanumeric (xx-xxxx-xxx)	The 11-digit NDE agency ID of the school the student is enrolled at
16	Fulltime Remote Opt-In	Alphanumeric (optional)	Not used for Summer benefits, but maintain a space for this in any file submissions. Submitting a blank or "N" is recommended.
17	Short Term Quarantine	Alphanumeric (optional)	Not used for Summer benefits, but maintain a space for this in any file submissions. Submitting a blank or "N" is recommended.