INSERT SCHOOL/DISTRICT NAME HERE Return this form to: School Year 2023-24 Family Income Survey OR **Apply Online:** Complete one application per household To ensure all students have equitable access to a high-quality public education, schools receive additional education funding based on the number of enrolled students who are from households that are at or below designated income levels. The Family Income Survey collects household income information that is used to see what additional funding the school might qualify for. The information provided may also qualify your student for additional supports. It is important that you complete this survey. **Step 1:** List **all students** living with you that are attending school. Middle Student's Last Name Student's First Name Date of Birth School Grade Initial **Step 2:** Are any of the listed **students**: In Foster Care Experiencing Homelessness Receiving Migrant Education Services Step 3: Do any household members participate in: Basic Food TANF Food Distribution on Indian Reservation (FDPIR) Step 4: Household Income: List all household members even if they do not receive income. For each household member listed, report total gross income (before taxes and deductions) Twice per Paid Bi-weekly Public Paid Bi-weekly Paid Twice per Paid Twice per Paid Bi-weekly Paid Bi-weekly Paid Monthly per Paid Monthly Paid Monthly Paid Weekly Paid Weekly Paid Monthly Earnings Pensions/ Any Other Assistance/ Month Paid Twice Names of ALL other household members from work Retirement/ Income Child (before any **Social Security** Not Already (do not include students listed above) Support/ deductions) (SSI) Listed Alimony

Step 5: Contact Information & Signature

I promise that the information on this application is true and that all income is reported. I understand that my child's school may qualify for additional state and federal funds based on the information I give. I understand that school officials may check the information. I understand my child's income status may be shared with other programs or agencies to support my child's education as allowed by law.

□ \$

Printed Name of Adult Household Member	Adult Household Member Signature	E-mail Address	
Mailing Address	City, State, & Zip Code	Daytime Phone	Date

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□ |\$

		SCHOOL USE ONLY – I	OO NOT WRI	TE BELOW THIS LINE					
ANNUAL INC	OME CONVERSION: Weekly x 52; Bi-Wee	kly x 26; Twice per month x 24; Month	ly x 12.	(Do NOT convert to	annual incom	e unless househ	old reports multiple	pay frequer	ncies).
APPROVAL:	☐ Basic Food/TANF/FDPIR/Foster☐ Income Household	Total Household Size Total Household Income	\$		Weekly	Bi-Weekly	2x per Month	Monthly	Annual
Application qua	alifies for household at or below the incon	ne eligibility guidelines listed below:	Yes	☐ No					
Date Notice Sent	Signature	e of Approving Official		Date					

Income Eligibility Guidelines Effective from July 1, 2023, through June 30, 2024

	Income				
Household Size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	\$26,973	\$2,248	\$1,124	\$1,038	\$519
2	\$36,482	\$3,041	\$1,521	\$1,404	\$702
3	\$45,991	\$3,833	\$1,917	\$1,769	\$885
4	\$55,500	\$4,625	\$2,313	\$2,135	\$1,068
5	\$65,009	\$5,418	\$2,709	\$2,501	\$1,251
6	\$74,518	\$6,210	\$3,105	\$2,867	\$1,434
7	\$84,027	\$7,003	\$3,502	\$3,232	\$1,616
8	\$93,536	\$7,795	\$3,898	\$3,598	\$1,799
For each additional household member, add:	\$9,509	\$793	\$397	\$366	\$183