

To get free or reduced user fee for your child, you must complete an application and return it to the school. We cannot approve an application that is not complete.

<p align="center">How to Apply</p> <p>If you now get Food Stamps or AFDC for the child you are applying for, the application must have the child's name, a Food Stamp or AFDC case number, and the signature of an adult household member. If you are applying for a foster child, the application must have the child's name, the child's "personal use" income, and an adult signature. If you do not list a Food Stamp or AFDC case number for the child you are applying for, then the application must have the child's name, the names of <u>all</u> other household members, the amount of income each person got last month and where it came from, the signature of an adult household member and that adult's Social Security number or the word "none" if the adult does not have a Social Security number.</p>	Income Chart School Year 2009/2010 (to be revised)			
	Household Size	Annual	Monthly	Weekly
	1	20036	1670	386
	2	26955	2247	519
	3	33874	2823	652
	4	40793	3400	785
	5	47712	3976	918
	6	54631	4553	1051
	7	61550	5130	1184
	8	68469	5706	1317
	Each add'l member add...	+ 6919	+577	+134

If you feel this is a financial burden please attach a separate sheet explaining your extenuating circumstances and this will be taken into account when reviewing your application.

Verification: Your eligibility may be checked at any time during the school year. School officials may ask you to send papers showing that your child should get free or reduced user fee.

<p><u>INCOME TO REPORT</u></p> <p><u>Earnings from Work</u> Wages/salaries/tips Strike benefits Unemployment compensation Worker's compensation Net income from self-owned business or farm</p>	<p><u>Pensions/Retirement/Social Security</u> Pensions Supplemental Security Income Retirement income Veteran's payments Social Security</p> <p><u>Welfare/Child Support/Alimony</u> Public assistance payments Welfare Payments Alimony/child support payments</p>	<p><u>Other Income</u> Disability benefits Cash withdrawn from savings Interest/Dividends Income from estates/trusts/investments Regular contributions from persons not living in the household Net royalties/annuities/net rental income Any other income</p>
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- Print Student Name: _____ Grade: _____
- List child's food stamp or AFDC case number if any. Food stamp # _____ AFDC # _____
- Foster Child: If student is a Foster Child, check box List child's monthly "personal use" income or if none "o" \$ _____
- Household Members & Monthly Income (If you gave a Food Stamp or AFDC case number, skip to Part 5.)

Names of Household Members	Gross <u>Monthly</u> Earnings Before Deductions		<u>Monthly</u> Welfare, Child Support, Alimony	<u>Monthly</u> Pensions, Retirement, Soc. Security	Other <u>Mo.</u> Income
	Job 1	Job 2			
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

5. Signature & Social Security Number:
I certify that all of the above information is true and correct and that all income is reported.
 Signature of Adult Household Member: _____ Social Security # _____
 Printed Name: _____ Home Tel. # () _____ Work Tel. # () _____
 Street/Apt. #: _____ City/State/Zip: _____ Date: _____

Office use only: Approved _____ Reduced _____ Free _____

Signature: _____ Date: _____

