

Apply online at:

STEP 1 List ALL Household Members who are infants, children, and students up to and including grade 12 (if more spaces are required for additional names, attach another sheet of paper)

Child's First Name	MI	Child's Last Name	Student?		Name of School/Center	Grade	Check all that apply	Head	Foster	Migrant,
			Yes	No				Start	Child	Runaway
			<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

STEP 2 Do any Household Members (including you) currently participate in one or more of the following eligible assistance programs: SNAP, TANF, or FDIPIR? If NO > [Go to STEP 3](#)

- ### STEP 3 Report Income for ALL Household Members (Skip this step if you answered 'Yes' to STEP 2)

Check if no SSN ☐

STEP 4 Contact information and adult signature.

<div></div>		<div></div>	<div></div>	<div></div>	<div></div>
Street Address (if available) Apt #		City	State	Zip	Daytime Phone and Email (optional)
<div></div>		<div></div>			<div></div>
Printed name of adult signing the form		Signature of adult			Today's date

Sources of Income

Sources of Income for Children	
Sources of Child Income	Example(s)
- Earnings from work	- A child has a regular full or part-time job where they earn a salary or wages
- Social Security <ul style="list-style-type: none"> - Disability Payments - Survivor's Benefits 	- A child is blind or disabled and receives Social Security benefits - A Parent is disabled, retired, or deceased, and their child receives Social Security benefits
-Income from person outside the household	- A friend or extended family member regularly gives a child spending money
-Income from any other source	- A child receives regular income from a private pension fund, annuity, or trust

Sources of Income for Adults		
Earnings from Work	Public Assistance / Alimony / Child Support	Pensions / Retirement / All Other Income
<ul style="list-style-type: none"> - Salary, wages, cash bonuses - Net income from self-employment (farm or business) <p>If you are in the U.S. Military:</p> <ul style="list-style-type: none"> - Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances) - Allowances for off-base housing, food and clothing 	<ul style="list-style-type: none"> - Unemployment benefits - Worker's compensation - Supplemental Security Income (SSI) - Cash assistance from State or local government - Alimony payments - Child support payments - Veteran's benefits - Strike benefits 	<ul style="list-style-type: none"> - Social Security (including railroad retirement and black lung benefits) - Private pensions or disability benefits - Regular income from trusts or estates - Annuities - Investment income - Earned interest - Rental income - Regular cash payments from outside household

Children's Racial and Ethnic Identities

Ethnicity (check one): ☐ Hispanic or Latino ☐ Not Hispanic or Latino

Race (check one or more): ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White

This institution is an equal opportunity provider.

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Total Income		How often? <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="padding: 2px 5px;">Weekly</td> <td style="padding: 2px 5px;">Bi-Weekly</td> <td style="padding: 2px 5px;">2x Month</td> <td style="padding: 2px 5px;">Monthly</td> </tr> <tr> <td style="text-align: center; padding: 5px;"><input type="radio"/></td> <td style="text-align: center; padding: 5px;"><input type="radio"/></td> <td style="text-align: center; padding: 5px;"><input type="radio"/></td> <td style="text-align: center; padding: 5px;"><input type="radio"/></td> </tr> </table>		Weekly	Bi-Weekly	2x Month	Monthly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Household size		Eligibility: <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="padding: 2px 5px;">Free</td> <td style="padding: 2px 5px;">Reduced</td> <td style="padding: 2px 5px;">Paid/Denied</td> </tr> <tr> <td style="text-align: center; padding: 5px;"><input type="radio"/></td> <td style="text-align: center; padding: 5px;"><input type="radio"/></td> <td style="text-align: center; padding: 5px;"><input type="radio"/></td> </tr> </table>		Free	Reduced	Paid/Denied	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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Free	Reduced	Paid/Denied																			
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>																			
Determining Official's Signature		Date		Confirming Official's Signature		Date															
Verifying Official's Signature		Date		Verifying Official's Signature		Date															