

## Preparing every student to thrive in a global society.

## Dear Parent(s)/Guardian(s)

It is important that you please complete the Income Eligibility Form upon enrollment. The Income Eligibility Form only counts when completed during the first year a student is enrolled at this school. The State of California provides funding to schools based on Income Determinations, Foster Youth enrollment, McKinney Vento Youth enrollment, English Language Learner enrollment, Justice Engaged Youth enrollment, and Migrant Youth enrollment.

East Side uses this funding to provide vital services to students, families, and staff at this school and across the district. Some of the services provided are:

- Academic Counseling for each student
- Mental Health Services for students including counseling and wellness centers
- \$5 Advanced Placement Exams to qualifying students
- Tutoring services for students
- Classroom bilingual Para Educators in classes
- Summer School
- College and financial aid workshops for students and parents
- Field Trips
- Credit Recovery Classes
- Parent support and assistance
- Smaller class sizes for our English Language Development classes
- Primary language support for our limited English speaking students and parents
- Resources, supplies and equipment for schools and classes

Thank you in advance for completing the Income Eligibility Form and helping us maintain and increase the services we can provide to students, families and staff.

830 N. Capitol Ave



East Side Union High School District - Income Eligibility Form						
Household Last Name: Phone: E-mail:						
PART I: Fill in the following information for children living in your household						
Name of Child(ren)		C4.	ıdent ID#	School Attending	Birth Date	Grade Level
Last	First	Sit	ident id#	Attending	Date	
2.						
3.						
4.						
5. 6.						
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PART II: Fill in the following for each source of Household Income  Household Income reported by Frequency:						
Household Members	Amount if Paid Weekly	Amount if Paid Weekly	Amount if Paid Twice Per Month	Amount if Paid Every Other Week	Amount if Paid Monthly	Amount if Paid Annually
Example: John Doe	\$600	\$	\$	\$	\$	\$
1.	\$	\$	\$	\$	\$	\$
2.	\$	\$	\$	\$	\$	\$
3.	\$	\$	\$	\$	\$	\$
All Additional Income	\$	\$	\$	\$	\$	\$
Subtotal	\$600	\$	\$	\$	\$	\$
Multiply Subtotal by:	X 52	X 52	X 24	X 26	X 12	
Total Income by Frequency	\$31,200	\$	\$	\$	\$	\$
Total Household Income (sum of all columns): \$						
PART III: Fill in the following information for Household Size						
Total number of adults and children in Household:						
Circle one: 1 2	3 4	5 6	5 7 8	Other		
See back of this form for information on household size.						
PART IV: Signature						
I certify (promise) that the information provided on this form is true and that I included all income. I understand that the school may receive state and federal funds based on the information I provide and that the information could be subject to review.						
Signature of Adult Househo	Date		Printed Name of Adult Household Member Completing this Form			

The information submitted on this form is a confidential educational record and is therefore protected by all relevant federal and state privacy laws that pertain to educational records including, without limitation, the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended (20 U.S.C. § 1232g; 34 CFR Part 99); Title 2, Division 4, Part 27, Chapter 6.5 of the California Education Code, beginning at Section 49060 et seq.; the California Information Practices Act (California Civil Code Section 1798 et seq.) and Article 1, Section 1 of the California Constitution.

## Who should I include in "Household Size"?

You must include yourself and all people living in your household, related or not (for example, children, grandparents, other relatives, or friends) who share income and expenses. If you live with other people who are economically independent (for example, who do not share income with your children, and who pay a prorated share of expenses), do *not* include them.

What is included in "Total Household Income"? Total Household Income includes all of the following:

- **Gross earnings from work:** Use your gross income, not your take-home pay. Gross income is the amount earned before taxes and other deductions. This information can be found on your pay stub or if you are unsure, your supervisor can provide this information. Net income should only be reported for self-owned business, farm, or rental income.
- **Welfare, Child Support, Alimony:** Include the amount each person living in your household receives from these sources, including any amount received from CalWORKs.
- Pensions, Retirement, Social Security, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), and disability benefits: Include the amount each person living in your household receives from these sources.
- All Other Income: Include worker's compensation, unemployment or strike benefits, regular
  contributions from people who do not live in your household, and any other income received. Do not
  include income from CalFresh, WIC, federal education benefits and foster payments received by your
  household.
- **Military Housing Allowances and Combat Pay:** Include off-base housing allowances. *Do not* include Military Privatized Housing Initiative or combat pay.
- Overtime Pay: Include overtime pay ONLY if you receive it on a regular basis.

## How do I report household income for pay received on a weekly, twice per month, every other week, monthly, and annual basis?

- For each household member determine the frequency in which income is received (weekly, twice per month, every other week, monthly, or annually) and enter amount in appropriate column. For example, if you are paid twice per month report the gross amount of your paycheck in the appropriate column.
- Repeat these steps for each source of income for each household member. If you have more sources of income than columns provided, report all additional income in the appropriate column.
- Add amounts reported in each column in the subtotal row. Multiply each subtotal by the appropriate number, as indicated on the form.
- Add all columns to determine the Total Household Income.

If your income changes, include the wages/salary that you regularly receive. For example, if you normally make \$1,000 each month, but you missed some work last month and made \$900, put down that you made \$1,000 per month. Only include overtime pay if you receive it on a regular basis. If you have lost your job or had your hours or wages reduced, enter zero or your current reduced income.

For additional information on Household Size and Gross Household Income, please see the Eligibility Manual for School Meals on the U.S. Department of Agriculture Guidance and Resource Web page at <a href="http://www.fns.usda.gov/cnd/guidance/default.htm">http://www.fns.usda.gov/cnd/guidance/default.htm</a>.

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