

WHY? COMPLETE A Household Income Data Collection Form?



\$ MONEY!

**FOR
AFTERSCHOOL,
ACADEMIC &
ENRICHMENT
PROGRAMS**

\$ MONEY!

**FOR CLASSROOMS,
TEACHERS AND STUDENTS**

Even with free meals for your School District in 2022-2023, it is still important to submit a Household Income Data Collection form.

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**State and Federal Funding for School
Budgets**

Household Income Data Collection

TRESD/Grizzly Hill School

2022-2023

Household Last Name: _____

Phone number: _____

PART I: Fill in the following information for children living in your household

Name of Child(ren) attending a California K-12 Public School			School Attending	Birth Date	Grade Level
Last	Middle	First			
1.					
2.					
3.					
4.					
5.					
6.					

PART II: Fill in the following information for Household Size and Household Income

Determine your TOTAL Household Income based on ONE of the following: yearly, monthly, twice per month, every two weeks, or weekly income. (See back of this form for additional instructions.)

1. Determine the TOTAL number of individuals living in your household (in the far left column below) supported by the Total Household Income you are reporting.
2. Determine the TOTAL household income below that reflects that income.

Example: if your household size is "4" (e.g., two adults and two children) and your total household income is \$28,000 a year (e.g., income of both adults), then your income falls within Category 1 because your total household income of \$28,000 a year is less than \$30,615.

HOUSE-H OLD SIZE	Total Household Income – Category 1 INCOME DOES NOT EXCEED					Total Household Income – Category 2 INCOME DOES NOT EXCEED				
	YEARLY	MONTHLY	TWICE PER MONTH	EVERY TWO WEEKS	WEEKLY	YEARLY	MONTHLY	TWICE PER MONTH	EVERY TWO WEEKS	WEEKLY
1										
2										
3										
4										
5										
6										
7										
8										

For each additional family member over 8, add:

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Based on what you have determined above, check one of the following boxes:

Our Total Household Income falls within: Category 1 Category 2 Neither Category

PART III: Signature

I certify (promise) that 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 Household Member
Completing this Form

Date

Printed Name of Adult Household Member
Completing this Form

Free Eligibility Scale Meals, Snacks, and Milk

Household Size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	\$ 16,588	\$ 1,383	\$ 692	\$ 644	\$ 319
2	\$ 22,412	\$ 1,868	\$ 934	\$ 862	\$ 431
3	\$ 28,236	\$ 2,353	\$ 1,177	\$ 1,086	\$ 543
4	\$ 34,060	\$ 2,839	\$ 1,420	\$ 1,310	\$ 655
5	\$ 39,884	\$ 3,324	\$ 1,662	\$ 1,534	\$ 767
6	\$ 45,708	\$ 3,809	\$ 1,905	\$ 1,758	\$ 879
7	\$ 51,532	\$ 4,295	\$ 2,148	\$ 1,982	\$ 991
8	\$ 57,356	\$ 4,780	\$ 2,390	\$ 2,206	\$ 1,103
For each additional family member, add:	\$ 5,824	\$ 486	\$ 243	\$ 224	\$ 112

Reduced-price Eligibility Scale Meals and Snacks

Household Size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	\$ 23,606	\$ 1,968	\$ 984	\$ 908	\$ 454
2	\$ 31,894	\$ 2,658	\$ 1,329	\$ 1,227	\$ 614
3	\$ 40,182	\$ 3,349	\$ 1,675	\$ 1,546	\$ 773
4	\$ 48,470	\$ 4,040	\$ 2,020	\$ 1,865	\$ 933
5	\$ 56,758	\$ 4,730	\$ 2,365	\$ 2,183	\$ 1,092
6	\$ 65,046	\$ 5,421	\$ 2,711	\$ 2,502	\$ 1,251
7	\$ 73,334	\$ 6,112	\$ 3,056	\$ 2,821	\$ 1,411
8	\$ 81,622	\$ 6,802	\$ 3,401	\$ 3,140	\$ 1,570
For each additional family member, add:	\$ 8,288	\$ 691	\$ 346	\$ 319	\$ 160