

Household Income Survey

Even if your income does not meet these Income Eligibility Guidelines, you must return the survey in order for the school's survey to be valid.

Your Address: _____ City _____ ST _____ Zip _____

1. Circle your household size below, and then answer the following questions:

Household Size (Circle One)	Est. Annual Income (As Reported to IRS)	Monthly Income	If Paid Two times per mo.	If Paid Every Two Weeks	Weekly Income
-1-	22,459	1,872	936	864	432
-2-	30,451	2,538	1,269	1,172	586
-3-	38,443	3,204	1,602	1,479	740
-4-	46,435	3,870	1,935	1,786	893
-5-	54,427	4,536	2,268	2,094	1,047
-6-	62,419	5,202	2,601	2,401	1,201
-7-	70,411	5,868	2,934	2,709	1,355
-8-	78,403	6,534	3,267	3,016	1,508
For each additional family member add	7,992	666	333	308	154

Is your income equal to or less than any of the amounts listed next to the number you circled? Yes No

Is your family participating in the Supplemental Nutrition Assistance Program (SNAP) - Oregon Trail Card? Yes No

Is your family participating in Temporary Aid to Needy Families (TANF)? Yes No

Is your family receiving Food Distribution Program on Indian Reservations (FDPIR)? Yes No

Do your students receive migrant, homeless or runaway education services? Yes No

2. Please list all students in your household that attend school. (Enter the grade they will be entering in Fall Write on back to list more than 5 students)

Name	Grade	School

3. Certification: I certify that the above information is, to the best of my knowledge, true and complete.

Signed: _____ Date: _____