



## FEE REDUCTION ELIGIBILITY APPLICATION

589 West Fremont Avenue · Sunnyvale, CA 94087 · (408) 522-2200

FREMONT UNION HIGH SCHOOL DISTRICT

2022-23

### PURPOSE AND CONFIDENTIALITY

- This application is **NOT** related or connected to the Free and Reduced Lunch program in any way.
- Completion of this form is voluntary and not required as part of any school related activity.
- All information will be kept confidential and will only be viewed in private by authorized personnel.
- The information provided on this application will only be used by school and district personnel to determine if your student is eligible for free or reduced payments for school related purchases/activities as determined by the school/district.
- This form is only good for one academic school year.
- If you have additional questions or concerns, please don't hesitate to contact your student's school.
- Please turn in completed forms to an Administrator or Guidance Counselor at your student's school.
- For Free & Reduced Meal Application: [fuhisd.org/departments/food-services/free-reduced-meal-program](https://fuhisd.org/departments/food-services/free-reduced-meal-program)

### CONTACT INFORMATION

Cupertino (408) 366-7370      Fremont (408) 522-2402      Homestead (408) 522-2502  
Lynbrook (408) 366-7702      Monta Vista (408) 366-7602      Dist. Office (408) 522-2226

### ESTIMATED INCOME ELIGIBILITY CHART

Your children **may** qualify for free or reduced fees if your **household income** falls at or below the limits on this chart.

Household Total Size	2	3	4	5	6	Each Add'l
Income Per Year	\$40,000	\$49,000	\$58,000	\$67,000	\$76,000	\$9,000
Income Per Month	\$3,333	\$4,083	\$4,833	\$5,583	\$6,333	\$750

### INSTRUCTIONS FOR APPLYING

- Part 1:** Please complete this section for each student in your household attending one of our District high schools. If the student does not attend one of our high schools, then please enter their information in Part 2.
- Part 2:** List all household members including name and birth date. There is no need to enter information for student(s) already listed in Part 1. Remember, a household is any child or adult living with you.
- Part 3:** For each household member that is **not** a student, list their name and each type of income received for the month.

Please be sure to record how much **per month** they receive, regardless of if the money is received daily, weekly, twice a month, etc.

For earnings, be sure to list the **gross income**, not the take-home pay. Gross income is the amount earned *before* taxes and other deductions.

For other income, list the amount each person received for the month from welfare, child support, alimony, retirement, Social Security, Supp. Security Income (SSI), Veteran's benefits, disability benefits, Worker's Compensation, unemployment, and *All Other Income* sources.

- Part 4:** Sign and Date the form (signature of parent/legal guardian only)



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**PART 1 – STUDENT(S) INFORMATION**

<b>Student #1 Legal Last Name</b>	<b>Student #1 Legal First Name</b>	<b>Student ID #</b>	<b>High School</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Student #2 Legal Last Name</b>	<b>Student #2 Legal First Name</b>	<b>Student ID #</b>	<b>High School</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Student #3 Legal Last Name</b>	<b>Student #3 Legal First Name</b>	<b>Student ID #</b>	<b>High School</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**PART 2 – HOUSEHOLD MEMBERS**

Last Name	First Name	Birth Date	Relationship to Student

**PART 3 – HOUSEHOLD MONTHLY INCOME**

Name (last name, first name)	Gross Earnings From Work (before deductions/taxes)	Other Income (list total of all other income)	Total Monthly Income
<b>TOTAL HOUSEHOLD INCOME</b>			

**PART 9 – SIGNATURES AND DECLARATION**

*I certify (promise) that all information on this application is true and that all income is reported. I understand that school officials may verify (check) the information. I understand that if I purposely give false information, my child may be ineligible for any fee reductions.*

\_\_\_\_\_

Parent/Guardian Signature

\_\_\_\_\_

Date

**NOTES ( For Office Use Only)**