# School Year 2023-24 Family Income Survey

## Return this form to: The front office of your Student's school

#### Complete one income survey per household

To ensure all students have equitable access to a high-quality public education, schools receive additional education funding based on the number of enrolled students who are from households that are at or below designated income levels. The Family Income Survey collects household income information that is used to see what additional funding the school might qualify for. The information provided may also qualify your student for additional supports. It is important that you complete this survey.

### Step 1: List all students living with you that are attending school.

| Student's Last Name | Student's First Name | Middle<br>Initial | Date of Birth | School | Grade |
|---------------------|----------------------|-------------------|---------------|--------|-------|
|                     |                      |                   |               |        |       |
|                     |                      |                   |               |        |       |
|                     |                      |                   |               |        |       |
|                     |                      |                   |               |        |       |
|                     |                      |                   |               |        |       |

Step 2: Are any of the listed students: In Foster Care Experiencing Homelessness Receiving Migrant Education Services

Step 3: Do any household members participate in: Basic Food TANF Food Distribution on Indian Reservation (FDPIR)

Step 4: Household Income: List all household members even if they do not receive income. For each household member listed, report total gross income (before taxes and deductions)

| Names of ALL other household members<br>(do not include students listed above) | Earnings<br>from work<br>(before any<br>deductions) | Paid Weekly | Paid Bi-weekly | Paid Twice per<br>Month | <u> </u> | Public<br>Assistance/<br>Child<br>Support/<br>Alimony | Paid Weekly | Paid Bi-weekly | Paid Twice per<br>Month | Paid Monthly | Pensions/<br>Retirement/<br>Social Security<br>(SSI) | Paid Weekly | Paid Bi-weekly | Paid Twice per<br>Month | Paid Monthly | Any Other<br>Income<br>Not Already<br>Listed | Paid Weekly | Paid Bi-weekly | Paid Twice per<br>Month | Paid Monthly |
|--|---|-------------|----------------|-------------------------|----------|---|-------------|----------------|-------------------------|--------------|--|-------------|----------------|-------------------------|--------------|--|-------------|----------------|-------------------------|--------------|
|  | \$  |             |                |                         |          | \$  |             |                |                         |              | \$   |             |                |                         |              | \$   |             |                |                         |              |
|  | \$  |             |                |                         |          | \$  |             |                |                         |              | \$   |             |                |                         |              | \$   |             |                |                         |              |
|  | \$  |             |                |                         |          | \$  |             |                |                         |              | \$   |             |                |                         |              | \$   |             |                |                         |              |
|  | \$  |             |                |                         |          | \$  |             |                |                         |              | \$   |             |                |                         |              | \$   |             |                |                         |              |

#### Step 5: Contact Information & Signature

I promise that the information on this income survey is true and that all income is reported. I understand that my child's school may qualify for additional state and federal funds based on the information I give. I understand that school officials may check the information. I understand my child's income status may be shared with other programs or agencies to support my child's education as allowed by law.

| Printed Name of Adult Household Member | Adult Household Member Signature |
|--|----------------------------------|
|  |                                  |

E-mail Address

#### Tukwila School District's Non-Discrimination Statement

Tukwila School District does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity, disability, or the use of a trained dog guide or service animal and provides equal access to the Boy Scouts and other designated youth groups. If you believe you have been discriminated against, please contact Aaron Draganov at: <u>draganova@tukwila.wednet.edu</u>.

|                  |   | SCHOOL USE ONLY – I                            | DO NOT W  | <b>RITE BELOW</b> | THIS LINE           |              |                  |                       |              |         |
|------------------|---|--|-----------|-------------------|---------------------|--------------|------------------|-----------------------|--------------|---------|
| ANNUAL INC       | OME CONVERSION: Weekly x 52; Bi-We        | ekly x 26; Twice per month x 24; Month         | ıly x 12. | (Do <b>NO</b>     | <b>T</b> convert to | annual incon | ne unless housel | hold reports multiple | e pay freque | ncies). |
| APPROVAL:        | Basic Food/TANF/FDPIR/Foster              | Total Household Size<br>Total Household Income | \$        |                   |                     | Weekly       | Bi-Weekly        | 2x per Month          | Monthly      | Annual  |
| Family Income S  | Survey qualifies for household at or belo | ow the income eligibility guidelines listed    | d below:  | Yes               |                     | No           |                  |                       |              |         |
| Date Notice Sent | Signatu                                   | e of Approving Official                        |           |                   | Date                |              |                  |                       |              |         |

## Income Eligibility Guidelines Effective from July 1, 2023, through June 30, 2024

|  | Income   |         |                    |                    |         |  |  |  |  |  |  |  |
|--|----------|---------|--------------------|--------------------|---------|--|--|--|--|--|--|--|
| Household Size                                   | Annual   | Monthly | Twice Per<br>Month | Every Two<br>Weeks | Weekly  |  |  |  |  |  |  |  |
| 1  | \$26,973 | \$2,248 | \$1,124            | \$1,038            | \$519   |  |  |  |  |  |  |  |
| 2  | \$36,482 | \$3,041 | \$1,521            | \$1,404            | \$702   |  |  |  |  |  |  |  |
| 3  | \$45,991 | \$3,833 | \$1,917            | \$1,769            | \$885   |  |  |  |  |  |  |  |
| 4  | \$55,500 | \$4,625 | \$2,313            | \$2,135            | \$1,068 |  |  |  |  |  |  |  |
| 5  | \$65,009 | \$5,418 | \$2,709            | \$2,501            | \$1,251 |  |  |  |  |  |  |  |
| 6  | \$74,518 | \$6,210 | \$3,105            | \$2,867            | \$1,434 |  |  |  |  |  |  |  |
| 7  | \$84,027 | \$7,003 | \$3,502            | \$3,232            | \$1,616 |  |  |  |  |  |  |  |
| 8  | \$93,536 | \$7,795 | \$3,898            | \$3 <i>,</i> 598   | \$1,799 |  |  |  |  |  |  |  |
| For each additional<br>household<br>member, add: | \$9,509  | \$793   | \$397              | \$366              | \$183   |  |  |  |  |  |  |  |