



Maritime Academy Charter School

Elementary/Middle School: 2275 Bridge Street, Bldg. 107, Philadelphia, PA 19137
Phone: 215-535-4555; Fax: 215-535-4398

High School: 2700 E. Huntingdon St., Philadelphia, PA 19125
Phone: 215-427-3090; Fax: 215-999-5027

Maritime Academy Charter School HOUSEHOLD SURVEY

2023-2024 School Year

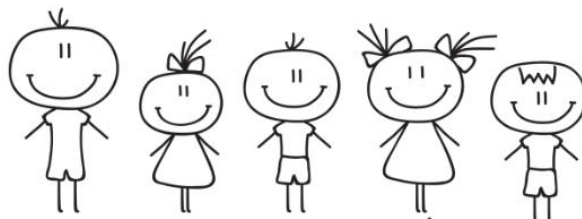
**PLEASE COMPLETE THE ATTACHED HOUSEHOLD
SURVEY***

We need everyone to return this survey in order for the survey to be considered valid.

THIS WILL HELP OUR SCHOOL EARN CASH FOR:

- Telecommunications
- School Lunch Program
- Technology
- Maintenance

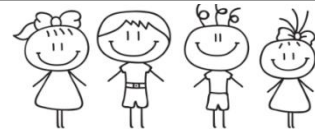
**This information will remain confidential and will be reported only as a total group, not by individual families.*



Household Survey Fall 2023/Winter 2024¹

Please complete and return to the school office as soon as possible.

Survey Number: _____



Address: _____ City _____ ST _____ Zip _____

Circle your household size (# of persons living at the above address), 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	\$ 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	3,598	1,799
Each additional family member	9,509	793	397	366	183

- Is your income equal to or less than any of the amounts listed next to the number you circled? Yes _____ No _____
- Is your family eligible for the Supplemental Nutrition Assistance Program (SNAP) – food stamps? Yes _____ No _____ Don't know _____
- Does your family qualify for medical assistance under Medicaid? Yes _____ No _____
- Is your family receiving Supplementary Security Income (SSI)? Yes _____ No _____
- Does your family receive housing assistance (section 8)? Yes _____ No _____
- Does your family receive home energy assistance (LIHEAP)? Yes _____ No _____

2. Please list all students in your household that attend school. (Enter the grade they will be entering in for this fall (2023). Write on back to list more than 5 students.)

Name	Grade	School Attending in Fall 2023

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

Signed: _____ Date: _____

¹Income Eligibility Guidelines for Reduced Priced are effective from July 1, 2023 through June 30, 2024. The Department's guidelines for free meals and milk and reduced price meals were obtained by multiplying the year 2023 Federal income poverty guidelines by 1.30 and 1.85, respectively, and by rounding the result upward to the next whole dollar.