

School: \_\_\_\_\_

Revised 01/02/2024

**2024-2025 Carson City School District Pre-K  
Income Verification Application for Program Eligibility**

**Instructions: Parents complete Part A. Please include names of each working parent and submit income verification documentation for each working parent.**

**Part A**

1. Child's Name: \_\_\_\_\_

2. Child's Date of Birth: \_\_\_\_\_

3. Parent Name(s): \_\_\_\_\_

4. Home Address: \_\_\_\_\_

5. Phone Number(s): \_\_\_\_\_

6. Home Language Survey:

What is the first language learned by the student? \_\_\_\_\_

What language does the child speak most often? \_\_\_\_\_

What languages are spoken in the home? \_\_\_\_\_

7. Check the applicable category of eligibility for this child:

IEP

Income Eligible (200% Poverty Level)

McKinney-Vent/Foster Care

Public Assistance (SNAP,TANF)

8. Number of working parents in household: \_\_\_\_\_

9. Number of people living in household: \_\_\_\_\_

10. What income documentation for each working parent in the household is being submitted to determine eligibility? (check one)

Income Tax 1040/2023

Foster Care Reimbursement

x3 Most recent pay stubs

SSI Documentation

SNAP/TANF Documentation

Unemployment

**PART B - FOR DISTRICT USE ONLY**

Calculation: \_\_\_\_\_  
\_\_\_\_\_ Total: \_\_\_\_\_

This child is eligible to participate in the program.  Yes  No

Staff signature: \_\_\_\_\_ Date of eligibility verification: \_\_\_\_\_

Staff name: \_\_\_\_\_ Title: \_\_\_\_\_