Lake Oswego School District

Instructions for Completing "2024-25 Request for Fee Waiver or Reduction" Form

Requests for resident fee waivers or fee reductions, except for the National School Lunch Program (NSLP) and Oregon Expanded Income Guidelines (OEIG) for school meals, will be processed using the attached form. Please complete the form and submit it to the following:

All Schools – please submit to your designated school

Community School¹ – please submit to Community School at sitefacilityusage@loswego.k12.or.us

Nutrition Services – please visit our website Free Meals Application page for application details

Elementary School before and after school provider – contact your school's provider

Fee waivers² will be awarded to resident households where total monthly income is at or below the levels shown in Table 1. If there are more than six members in your household, contact the district business office for additional guidance at 503-534-2308.

Table 1
Income Qualifications for Fee Waivers

Household	Monthly Gross
Size	Income
1	\$2,322
2	\$3,152
3	\$3,981
4	\$4,810
5	\$5,640
6	\$6,469

Fee reductions will be awarded on a sliding income scale according to Table #2 below.

Table 2
Income Qualifications for Reduced Fees

	Fee Reduction Levels Based on Monthly Gross Incomes					
Household	25%		50%		75%	
Size	Maximum	Minimum	Maximum	Minimum	Maximum	Minimum
1	\$3,764	\$3,285	\$3,284	\$2,805	\$2,804	\$2,323
2	\$5,109	\$4,458	\$4,457	\$3,806	\$3,805	\$3,153
3	\$6,454	\$5,630	\$5,629	\$4,807	\$4,806	\$3,982
4	\$7,799	\$6,802	\$6,801	\$5,808	\$5,807	\$4,811
5	\$9,144	\$7,975	\$7,974	\$6,809	\$6,808	\$5,641
6	\$10,489	\$9,146	\$9,145	\$7,810	\$7,809	\$6,470

General questions regarding eligibility or fee schedules should be directed to the district business office (503-534-2308). Completed forms may be submitted to your student's school or to the appropriate department. If greater discretion is desired, forms may be submitted directly to the district's Business Office.

¹ Fee waiver or reduction does not apply to CS programs operated by outside parties and are subject to other limitations. (see website)

² Under conditions of "hardship," households who do not otherwise qualify under the income limits listed above may be granted fee waivers or reductions. Where you believe that payment of fees would impose a hardship, although you do not qualify under the income limits specified above, you may choose to submit other information documenting the hardship. This information will be considered in determining eligibility for fee waivers.



Lake Oswego School District 2024-25 Request for Fee Waiver or Reduction

I am requesting a waiver or reduction of a Lake Oswego School District fee based on economic need.

Student for Whom the Fee Reduction is Requested:			
School Where Enrolled:			
Description of Fee and Amount:			
Family Information Current Address:			
Current Phone Number:			
Income Source #1 Household Member's Name:			
Employer:			
Monthly Gross Income:			
Employer Contact Phone Number:			
Income Source #2 Household Member's Name:			
Employer:			
Monthly Gross Income:			
Employer Contact Phone Number:			
Other Source of Income Household Member's Name:			
Source:			
Monthly Gross Income:			
Source Contact Phone Number:			
Total Monthly Gross Income:			
I certify that the information provided is accurate and c income. I authorize the school district to verify any understand that eligibility for fee reductions may be dep	y and all information	n provided on this for	
I also agree to notify the school district within 30 d household's gross monthly income levels.	ays if there are any	changes in the status	of our
Parent Signature			
Parent Name (Please Print)		Date	
FOR DISTRICT USE ONLY:			
Approved for (description):	By:		
Date:		Signature	(5/24)