



South San Antonio ISD Statement of Income/ No Income

Child's Name:	DOB:
Parent/Guardian Name:	
For Head Start Eligibility, income is defined as:	
Income means gross income and only includes wages, business income, unemployment compensation, pension or annuity payments, gifts that exceed the threshold for taxable income, and military income (excluding special pay for a member subject to hostile fire or imminent danger under 37 U.S.C. 310 or any basic allowance for housing under 37 U.S.C. 403 including housing acquired under the alternative authority under 10 U.S.C. 169 or any related provision of law). Gross income only includes sources of income provided in this definition; it does not include refundable tax credits nor any forms of public assistance.	
Check one:	☐ Statement of No Income (Must be completed by family with \$0 Income)
	☐ Statement of undocumented income (Must be completed for all undocumented income)
	☐ Statement of Excluded Income: (Must be completed for income from Social Security Benefits, Child Support, Alimony, veteran's benefits, regular support from the absent parent, or tuition support paid directly to school/provider).
PARENT/ GUARDIAN COMPLETES THIS PORTION	
As the parent/ guardian of the child applying for Head Start services, I certify that I/we had \$ _____ (year) ☐ Income from _____ to _____ or ☐ current situation. Parent Explanation _____ _____ _____ _____	
I understand that if I provide false information about my income or my family situation, my child may be denied services. Parent/Guardian Signature: _____ Date: _____ ***** I have determined to the best of my ability that the information provided by the family is true and reflects the family's income and verifies their eligibility for acceptance into the Head Start program. (45 CFR 1302.12(c)(d)(i)(k)) Staff Signature: _____ Date: _____ ERSEA 03/2026	