

[Insert School Name]
Application for Need-Based Assistance
2018-2019

Every school year, a variety of opportunities are available for students from families with limited financial resources. **Use this space to describe how the school plans to use the household socioeconomic information to assist the student. Examples include, but are not limited to, fee waivers for Advanced Placement Testing or SATs, a grant for classroom technology, after-school tutoring, band or athletic uniforms, etc.**

If your household income falls below the ranges specified below and you would like your child to be considered as these opportunities arise, please complete this form and return it to the Principal's Office. Only students with a signed and completed form on file will be considered for these need-based opportunities.

I, _____, am the parent or legal guardian of
Print Name of Parent

Print Name of Student

Check the box below that best matches your household size and yearly income:

- There are 2 people in our household and our yearly income is less than \$30,451 (or less than \$2,538 per month).
- There are 3 people in our household and our yearly income is less than \$38,443 (or less than \$3,204 per month).
- There are 4 people in our household and our yearly income is less than \$46,435 (or less than \$3,870 per month).
- There are 5 people in our household and our yearly income is less than \$54,427 (or less than \$4,536 per month).
- There are 6 people in our household and our yearly income is less than \$62,419 (or less than \$5,202 per month).
- There are 7 people in our household and our yearly income is less than \$70,411 (or less than \$5,868 per month).
- There are 8 people in our household and our yearly income is less than \$78,403 (or less than \$6,534 per month).

Parent/Guardian Signature _____ **Date** _____