

(Template)

School Year 2022 - 2023 Economically Disadvantaged Form

This application should be completed even if your student attends a Community Eligibility Provision or Provision School.

School: _____ Grade: _____ Student Number: _____

Student Name: _____

Please select the income range that represents the total annual gross income:

- | | | |
|---|---|---|
| <input type="radio"/> Less than \$25,142 | <input type="radio"/> Between \$51,338 and \$60,070 | <input type="radio"/> Between \$86,266 and \$94,998 |
| <input type="radio"/> Between \$25,142 and \$33,874 | <input type="radio"/> Between \$60,070 and \$68,802 | <input type="radio"/> Between \$94,998 and \$103,730 |
| <input type="radio"/> Between \$33,874 and \$42,606 | <input type="radio"/> Between \$68,802 and \$77,534 | <input type="radio"/> Between \$103,730 and \$112,462 |
| <input type="radio"/> Between \$42,606 and \$51,338 | <input type="radio"/> Between \$77,534 and \$86,266 | <input type="radio"/> Between \$112,462 and \$121,194 |

Please select the total number of people in your household:

- | | | |
|---------------------------------|---------------------------------|-----------------------------------|
| <input type="radio"/> One (1) | <input type="radio"/> Five (5) | <input type="radio"/> Nine (9) |
| <input type="radio"/> Two (2) | <input type="radio"/> Six (6) | <input type="radio"/> Ten (10) |
| <input type="radio"/> Three (3) | <input type="radio"/> Seven (7) | <input type="radio"/> Eleven (11) |
| <input type="radio"/> Four (4) | <input type="radio"/> Eight (8) | <input type="radio"/> Twelve (12) |

Signature: I certify that all information provided on this form is true to the best of my knowledge and that all household income is reported. I understand that this information will impact federal and state funding to the school.

Sign Here: _____ Date: _____

Print Name: _____

For Office use only:

- Qualified Not Qualified