

Household Income Data Collection – Summerville Union High School District 2020-2021

Household Last Name: _____ Phone: _____ E-mail: _____

PART I: Fill in the following information for children living in your household

| Name of Child(ren) attending a California K-12 Public School | | | School Attending | Birth Date | Grade Level |
|--|--------|-------|------------------|------------|-------------|
| Last | Middle | First | | | |
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 5. | | | | | |
| 6. | | | | | |

PART II: Fill in the following for Household Size and Household Income

Based on your household size, check the appropriate box if your total annual household income is within the range displayed for Category 1 or Category 2. **Do not check an income in both categories.**

For help in determining your household size and total annual household income, please see instructions on the back of this form.

| Household Size | Category 1 – Total Annual Household Income is Within This Range: | Category 2 – Total Annual Household Income is Within This Range: |
|----------------|--|--|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |

If household size is greater than 8, list household size and total annual income below:

Household Size: _____ Total Annual Income: \$ _____

If your total annual household income exceeds the ranges above, check here:

PART III: Signature

I certify (promise) that the information provided on this form is true and that I included all income. I understand that the school may receive state and federal funds based on the information I provide and that the information could be subject to review.

Signature of adult household member completing this form

Date

Printed name of adult household member completing this form

The information submitted on this form is a confidential educational record and is therefore protected by all relevant federal and state privacy laws that pertain to educational records including, without limitation, the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended (20 U.S.C. § 1232g; 34 CFR Part 99); Title 2, Division 4, Part 27, Chapter 6.5 of the California Education Code, beginning at Section 49060 et seq.; the California Information Practices Act (California Civil Code Section 1798 et seq.) and Article 1, Section 1 of the California Constitution.

Who should I include in “Household Size”?

You must include yourself and all people living in your household, related or not (for example, children, grandparents, other relatives, or friends) who share income and expenses. If you live with other people who are economically independent (for example, who do not share income with your children, and who pay a pro-rated share of expenses), do *not* include them.

What is included in “Annual Household Income”? Annual Household Income includes the following:

- **Gross earnings from work:** Use your gross income, not your take-home pay. Gross income is the amount earned before taxes and other deductions. This information can be found on your pay stub or if you are unsure, your supervisor can provide this information. Net income should only be reported for self-owned business, farm, or rental income.
- **Welfare, Child Support, Alimony:** Include the amount each person living in your household receives from these sources, including any amount received from CalWORKs.
- **Pensions, Retirement, Social Security, Supplemental Security Income (SSI), Veteran’s benefits (VA benefits), and disability benefits:** Include the amount each person living in your household receives from these sources.
- **All Other Income:** Include worker’s compensation, unemployment or strike benefits, regular contributions from people who do not live in your household, and any other income received. Do not include income from CalFresh, WIC, federal education benefits and foster payments received by your household.
- **Military Housing Allowances and Combat Pay:** Include off-base housing allowances. *Do not* include Military Privatized Housing Initiative or combat pay.
- **Overtime Pay:** Include overtime pay *ONLY* if you receive it on a regular basis.

How do I report annual household income for pay received on a monthly, twice a month, every two weeks, or weekly basis?

- Determine each source of household income based on above definitions. Households that receive income at different time intervals must annualize their income as follows:
 - If paid monthly, multiply total pay by 12
 - If paid twice per month, multiply total pay by 24
 - If paid bi-weekly (every two weeks), multiply total pay by 26
 - If paid weekly, multiply total pay by 52
- Add annualized pay together to determine the total annual household income and check the box on the other side of this form if it is within either of the ranges displayed for your household size.
- If your household size exceeds the size on the chart, list household size and total annual household income in the space provided.

If your income changes, include the wages/salary that you regularly receive. For example, if you normally make \$1,000 each month, but you missed some work last month and made \$900, put down that you made \$1,000 per month. Only include overtime pay if you receive it on a regular basis. If you have lost your job or had your hours or wages reduced, enter zero or your current reduced income.

For additional information on Household Size and Household Income, please see the Eligibility Manual for School Meals on the U.S. Department of Agriculture Guidance and Resource Web page at <http://www.fns.usda.gov/cnd/quidance/default.htm>.

Income Eligibility Scales for School Year 2020-21

Household is synonymous with family and means a group of related or unrelated individuals who are not residents of an institution or boarding house, but who are living as one economic unit sharing housing and all significant income and expenses. This scale does not apply to households that receive Supplemental Nutrition Assistance Program (SNAP) benefits—known as CalFresh in California, Food Distribution Program on Indian Reservations (FDPIR) benefits, or children who are recipients of Temporary Assistance for Needy Families—known as CalWORKs in California. Those children are automatically eligible for free meal benefits.

In the Adult Care Component of the Child and Adult Care Food Program, a household includes the adult participant and, if residing with the participant, the spouse as well as any persons who are economically dependent on the adult participant. This scale does not apply to members of SNAP households, or recipients of Supplemental Security Income, Medicaid (known as Medi-Cal in California), or FDPIR benefits. Those participants are automatically eligible for free meals.

Effective July 1, 2020, through June 30, 2021, participants from households with incomes at or below the following levels may be eligible for free or reduced-price meals or free milk.

Note: The new income calculations are based on annual figures and the following formulas: Monthly = annual income divided by 12; Twice Per Month = annual income divided by 24; Every Two Weeks = annual income divided by 26; and Weekly = annual income divided by 52. All dollar amounts are rounded up to the next whole dollar.

Free Eligibility Scale Meals, Snacks, and Milk

| Household Size | Annual | Monthly | Twice Per Month | Every Two Weeks | Weekly |
|--|-----------|----------|-----------------|-----------------|----------|
| 1 | \$ 16,588 | \$ 1,383 | \$ 692 | \$ 638 | \$ 319 |
| 2 | \$ 22,412 | \$ 1,868 | \$ 934 | \$ 862 | \$ 431 |
| 3 | \$ 28,236 | \$ 2,353 | \$ 1,177 | \$ 1,086 | \$ 543 |
| 4 | \$ 34,060 | \$ 2,839 | \$ 1,420 | \$ 1,310 | \$ 655 |
| 5 | \$ 39,884 | \$ 3,324 | \$ 1,662 | \$ 1,534 | \$ 767 |
| 6 | \$ 45,708 | \$ 3,809 | \$ 1,905 | \$ 1,758 | \$ 879 |
| 7 | \$ 51,532 | \$ 4,295 | \$ 2,148 | \$ 1,982 | \$ 991 |
| 8 | \$ 57,356 | \$ 4,780 | \$ 2,390 | \$ 2,206 | \$ 1,103 |
| For each additional family member, add: | \$ 5,824 | \$ 486 | \$ 243 | \$ 224 | \$ 112 |

Reduced-price Eligibility Scale Meals and Snacks

| Household Size | Annual | Monthly | Twice Per Month | Every Two Weeks | Weekly |
|--|-----------|----------|-----------------|-----------------|----------|
| 1 | \$ 23,606 | \$ 1,968 | \$ 984 | \$ 908 | \$ 454 |
| 2 | \$ 31,894 | \$ 2,658 | \$ 1,329 | \$ 1,227 | \$ 614 |
| 3 | \$ 40,182 | \$ 3,349 | \$ 1,675 | \$ 1,546 | \$ 773 |
| 4 | \$ 48,470 | \$ 4,040 | \$ 2,020 | \$ 1,865 | \$ 933 |
| 5 | \$ 56,758 | \$ 4,730 | \$ 2,365 | \$ 2,183 | \$ 1,092 |
| 6 | \$ 65,046 | \$ 5,421 | \$ 2,711 | \$ 2,502 | \$ 1,251 |
| 7 | \$ 73,334 | \$ 6,112 | \$ 3,056 | \$ 2,821 | \$ 1,411 |
| 8 | \$ 81,622 | \$ 6,802 | \$ 3,401 | \$ 3,140 | \$ 1,570 |
| For each additional family member, add: | \$ 8,288 | \$ 691 | \$ 346 | \$ 319 | \$ 160 |