Name of all Students & Child(ren)				chool E	Birth Grade
Last	First	Student Scho	ool ID# Att	ending [	Date Level
1.					
2.					
3. 4.					
5.					
6.					
PART II: Fill in the follo	wing informati	on for House	old Sizo	<u> </u>	,
Total number of adults an				n form to motob num	
Circle one: 1 2		5 6	7 8	Other	iber you circled)
See back of this form for informat	-				
PART III: Fill in the follo			icobold Incom	10	
PART III. FIII III IIIE IOIIC			ed by Frequen		
Household Members	Amount if Paid Weekly	Amount if Paid Twice Per Month	Amount if Paid Every Other Week	Amount if Paid Monthly	Amount if Paid Annually
1.	\$	\$	\$	\$	\$
2.	\$	\$	\$	\$	\$
3.	\$	\$	\$	\$	\$
4.	\$	\$	\$	\$	\$
All Additional Income	\$	\$	\$	\$	\$
Subtotal	\$	\$	\$	\$	\$
Multiply Subtotal by:	X 52	X 24	X 26	X 12	
otal Income by Frequency	\$	\$	\$	\$	\$
	Tota	al Household	<b>Income</b> (sum c	of all columns):	\$
		PART IV: Signa	ature		
l certify (promise) that the understand that the scho and that the information o	e information pro ol may receive :	ovided on this state and feder	form is true and		
Signature of Parent or LEA I spoken to Completing this F		te Tim	ne Name of	adult Household	d Member
		ute is an Equal Oppo			

Entered in Linq:\_\_\_\_\_ Letter emailed/printed:\_\_\_\_\_ Intial:\_\_\_\_ EILIGIBILITY EQUIVALENT: \_\_\_\_\_

Household Last Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

23-24 SY EDUCATION BENEFITS FORM - Brentwood Union School District

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 prorated share of expenses), do *not* include them.

## What is included in "Total Household Income"? Total Household Income includes all of 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 household income for pay received on a weekly, twice per month, every other week, monthly, and annual basis?

- For each household member determine the frequency in which income is received (weekly, twice per month, every other week, monthly, or annually) and enter amount in appropriate column. For example, if you are paid twice per month report the gross amount of your paycheck in the appropriate column.
- Repeat these steps for each source of income for each household member. If you have more sources of income than columns provided, report all additional income in the appropriate column.
- Add amounts reported in each column in the subtotal row. Multiply each subtotal by the appropriate number, as indicated on the form.
- Add all columns to determine the Total Household Income.

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