



**Eureka City
Schools**

Paul Ziegler, Assistant Superintendent
Business Services

2100 J Street | Eureka, CA 95501

Re: 2023/2024 School Year
Benefit Eligibility Survey

Dear Parents/Guardians,

Eureka City Schools is proud to once again be a part of California's Universal Meals Program offering free breakfast, lunch, and an afterschool meal to all students enrolled in our district. Because of this, traditional meal eligibility applications are no longer required. Instead, we ask that each family please fill out the attached Benefit Eligibility Survey and return the completed form to your student's school by Friday, September 8, 2023. The data gathered through this survey is confidential, and ensures that your child's school continues to receive full educational funding from State and Federal entities.

Only **one survey per family** is needed and all families are encouraged to complete a new survey annually.

This survey may be returned to your child's school, faxed to (707) 441-0293, or scanned/emailed to ledickinson@eurekacityschools.org. You may also complete the survey online at: <https://ecsnutritionservices.com/>.

If you have any questions, or need help completing the survey, please contact Food Services at (707) 441-2501.

Thank you for your assistance,

Paul Ziegler
Assistant Superintendent of Business Services

2023/2024 Benefit Eligibility Survey

Dear Parent or Guardian -

The information provided in this survey is confidential with the sole purpose of helping provide allocation of state and federal funds that support student learning at your child's school.

PART I: Eureka City Schools Student Household Information

Name of Child(ren) attending a California K-12 Public School			School Attending	Grade	Date of Birth	OFFICE USE ONLY Student ID
Legal Last name	Middle Initial	First Name				
1.						
2.						
3.						
4.						
5.						
6.						

PART II: Mark the appropriate monthly gross income for your household size

Based on the size of your household, check the appropriate box of your **total** monthly household income. **Do not check multiple incomes.**

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

Total Monthly Household Gross Income:

Please mark the appropriate monthly income amount for your family size

1 Person living in home	<input type="checkbox"/> \$1,580 or below	<input type="checkbox"/> between \$1,581 - \$2,248	<input type="checkbox"/> more than \$2,249
2 People living in home	<input type="checkbox"/> \$2,137 or below	<input type="checkbox"/> between \$2,138 - \$3,041	<input type="checkbox"/> more than \$3,042
3 People living in home	<input type="checkbox"/> \$2,694 or below	<input type="checkbox"/> between \$2,695 - \$3,833	<input type="checkbox"/> more than \$3,834
4 People living in home	<input type="checkbox"/> \$3,250 or below	<input type="checkbox"/> between \$3,251 - \$4,625	<input type="checkbox"/> more than \$4,626
5 People living in home	<input type="checkbox"/> \$3,807 or below	<input type="checkbox"/> between \$3,808 - \$5,418	<input type="checkbox"/> more than \$5,419
6 People living in home	<input type="checkbox"/> \$4,364 or below	<input type="checkbox"/> between \$4,365 - \$6,210	<input type="checkbox"/> more than \$6,211
7 People living in home	<input type="checkbox"/> \$4,921 or below	<input type="checkbox"/> between \$4,922 - \$7,003	<input type="checkbox"/> more than \$7,004
8 People living in home	<input type="checkbox"/> \$5,478 or below	<input type="checkbox"/> between \$5,479 - \$7,795	<input type="checkbox"/> more than \$7,796
9 People living in home	<input type="checkbox"/> \$6,035 or below	<input type="checkbox"/> between \$6,036 - \$8,588	<input type="checkbox"/> more than \$8,589
10 People living in home	<input type="checkbox"/> \$6,592 or below	<input type="checkbox"/> between \$6,593 - \$9,381	<input type="checkbox"/> more than \$9,382

If household size is greater than 10, please specify total size and income below:

Household size: _____ Total Monthly Income: \$ _____

PART III: SIGNATURE

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

Signature of adult completing this form _____ Date _____ Printed name of adult completing this form _____

Office Use ONLY

Determining Official Signature: _____ Determining Official Name: _____ Determination (Circle one): YESF YESR NO

_____ Date Reviewed: _____

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/guidance/default.htm>.