APPLICATION FOR FEE WAIVER FOR 2019-2020

Name of Student

The Winnetka Public Schools offer fee waivers for families who meet federal poverty guidelines.

I, the undersigned parent / guardian of the student named above, hereby request that the Board of Education of School District 36 waive school fees pursuant to the Illinois School Code, 105 ILCS 5/10-20.13.

ELIGIBILITY

Please note the eligibility requirements listed in the attached Board Policy Statement.

You must provide written evidence of your eligibility. Acceptable documents are:

1. A copy of your 2018 Federal or state income tax return, along with a copy of all W2’s
2. A copy of your payroll check stubs, two stubs for each employed parent

Section 1 - Household Income

The United States Department of Agriculture has not yet issued the income guidelines beginning July 1, 2019. In the meantime, eligibility guidelines for July 1, 2018 through June 30, 2019 can be used.

In order for your son or daughter to be eligible for a fee waiver, your family’s gross income must be at or below the levels below as specified by federal guidelines.

Please circle in the box below your household gross income and family size

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Annual Income</th>
<th>Monthly Income</th>
<th>Twice a Month</th>
<th>Every Two Weeks</th>
<th>Weekly</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>15,782</td>
<td>1,316</td>
<td>658</td>
<td>607</td>
<td>304</td>
</tr>
<tr>
<td>2</td>
<td>21,398</td>
<td>1,784</td>
<td>892</td>
<td>823</td>
<td>412</td>
</tr>
<tr>
<td>3</td>
<td>27,014</td>
<td>2,252</td>
<td>1,126</td>
<td>1,097</td>
<td>520</td>
</tr>
<tr>
<td>4</td>
<td>32,630</td>
<td>2,720</td>
<td>1,360</td>
<td>1,255</td>
<td>628</td>
</tr>
<tr>
<td>5</td>
<td>38,246</td>
<td>3,188</td>
<td>1,594</td>
<td>1,471</td>
<td>736</td>
</tr>
<tr>
<td>6</td>
<td>43,862</td>
<td>3,656</td>
<td>1,828</td>
<td>1,687</td>
<td>844</td>
</tr>
<tr>
<td>7</td>
<td>49,478</td>
<td>4,124</td>
<td>2,062</td>
<td>1,903</td>
<td>952</td>
</tr>
<tr>
<td>8</td>
<td>55,094</td>
<td>4,592</td>
<td>2,296</td>
<td>2,119</td>
<td>1,060</td>
</tr>
<tr>
<td>Each additional family member</td>
<td>5,616</td>
<td>468</td>
<td>234</td>
<td>216</td>
<td>108</td>
</tr>
</tbody>
</table>
Income is defined as any monies earned before any deductions such as income taxes, social security taxes, insurance premiums, charitable contributions, and bonds. It includes the following: 1) monetary compensation for services including wages, salary, commissions or fees; 2) net income from non-farm self-employment; 3) net income from farm self-employment; 4) social security; 5) dividends or interest on savings or bonds or income from estates or trusts; 6) net rental income; 7) public assistance or welfare payments; 8) unemployment compensation; 9) government civilian employee or military retirement or pensions or veteran payments; 10) private pensions or annuities; 11) alimony of child support payments; 12) regular contributions from persons not living in the household; 13) net royalties; and 14) other cash income. Other cash income would include cash amounts received or withdrawn from any source including savings, investments, trust accounts, and other resources which would be available to pay the price of a child’s meal.

Section 2 – Pertinent Information

Describe any extenuating circumstances concerning your request for a fee waiver. (You may attach extra sheets, if necessary.)

__________________________________________

__________________________________________

__________________________________________

Please check all that apply:

___ Waiver of activity fees for the 2019-2020 school year

___ Waiver of bus fees for the 2019-2020 school year

I have reviewed the District’s policy and am specifically aware that supplying false information to obtain a fee waiver is a Class 4 Felony (Ill. Rev. Stat., Ch. 38, Sec. 17.6). I certify (promise) that all information on this application is true and that all income is reported. I understand that school officials may verify (check) the information. I understand that if I purposely give false information, my children may lose meal and fee waiver benefits, and I may be prosecuted.

Parent/Guardian

Signature

Date

Print Name of Parent/Guardian

Address

Street

City

Zip

Phone

Home

Work

Cell

Email Address (optional)