

2021-2022 Blue Valley School District Household Economic Survey

NOTE: Do NOT complete this form if you are Directly Certified and are currently receiving FA, TAF, Foster, FDPIR, Homeless, or Migrant benefits.

Complete one survey per household and return to any Blue Valley School. Please use a pen (not a pencil).

STEP 1 STUDENT INFORMATION - Print the name, birth date, grade and school of EACH child who will attend a Blue Valley School District School this year.

Student ID (Optional)	Student's First Name	MI	Student's Last Name	Student's Birth Date	Grade	School Name
				MM DD YY		
				MM DD YY		
				MM DD YY		
				MM DD YY		
				MM DD YY		
				MM DD YY		
				MM DD YY		
				MM DD YY		

STEP 2 Report Income for ALL Household Members and the Total Household Members (children and adults)

A. STUDENT INCOME: Sometimes Students in the household earn income. Please include the TOTAL income earned by all Students listed in STEP 1 here.

Total Student income

\$ \$ \$ \$ \$

How often?

Weekly Bi-Weekly 2x Monthly Monthly

W 2W 2M M

YES! **NO!**

C. Total Number of Household Members
(From STEP 1 and STEP 2)

B. ALL OTHER HOUSEHOLD MEMBERS (including yourself). List all Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they do receive income, report total gross income for each source in whole dollars only. If they do not receive income from any source, write '0'. If you enter '0' or leave any fields blank, you are certifying (promising) that there is no income to report.

Name of ALL OTHER Household Members (First and Last)

Name of ALL OTHER Household Members (First and Last)	Earnings from Work	How often?				Public Assistance/SSI/ Child Support/Alimony	Pensions/Retirement/ All Other Income	How often?			
		Weekly	Bi-Weekly	2x Monthly	Monthly			Weekly	Bi-Weekly	2x Monthly	Monthly
List all other household members	\$ \$ \$ \$ \$	W	2W	2M	M	\$ \$ \$ \$ \$	\$ \$ \$ \$ \$	W	2W	2M	M
	\$ \$ \$ \$ \$	W	2W	2M	M	\$ \$ \$ \$ \$	\$ \$ \$ \$ \$	W	2W	2M	M
	\$ \$ \$ \$ \$	W	2W	2M	M	\$ \$ \$ \$ \$	\$ \$ \$ \$ \$	W	2W	2M	M
	\$ \$ \$ \$ \$	W	2W	2M	M	\$ \$ \$ \$ \$	\$ \$ \$ \$ \$	W	2W	2M	M

STEP 3 Contact information (Printed) and parent/guardian signature

Certification: "I certify (promise) that all information on this Application is true and that all income is reported. I understand that this information is given in connection with the receipt of federal and state funds, along with eligibility for financial assistance with school registration and/or bus fees. School officials may verify (check) the information."

- -

Daytime Telephone Number

E-mail Address

X SIGNATURE REQUIRED

Signature of parent/guardian completing the form

MM DD YY

Today's date

SCHOOL USE ONLY

Free Reduced Not Eligible

Total Household Annual Income:

FIRST NAME of parent/guardian completing the form

LAST NAME of parent/guardian completing the form