

Income Verification Section

Part 1 – Family Members in Household - Please list all members of your family that reside in your household. Answer all questions - use the codes listed below for Ethnicity, Language, Education Level, Employment and Education questions.

Name	Sex – M or F	Date of Birth	Relationship to Child	Employment	Student – School of Attendance
Employment: FT – Full Time PT – Part Time / Less than 35 Hrs S – Seasonal U – Unemployed D - Disabled				School: A – JLE B – MCS C – Jr/Sr HS D – College- please name O – Please name	

Part 2 – Household Income - Proof of Income includes all income received in the last twelve months.

Name of Household Member	Date	Source of Income (see codes below)	Amount	Annual Amount	No Income
	___/___/___ to ___/___/___		\$_____ Every _____	\$_____	<input type="checkbox"/>
	___/___/___ to ___/___/___		\$_____ Every _____	\$_____	<input type="checkbox"/>
	___/___/___ to ___/___/___		\$_____ Every _____	\$_____	<input type="checkbox"/>

Employment Verification Codes:
 PS – Pay Stub SSI – Supplemental Security Income WC – Worker Compensation EL – Employment Letter
 CS – Child Support A – Alimony TANF – Temp. financial Assistance Program FC – Foster Care
 W2 – W-2 Form IT – Income Tax Form O – Please list

I certify that all of the information on this form is true and that I have disclosed all family income for the time period stated.

Signature: _____ Print Name: _____ Date: _____