



JENNIFER DECKER SCHOLARSHIP FORM

PROOF OF INCOME REQUIRED!!!

2014 INCOME TAX RETURNS

NAME OF PARTICIPANT

ADDRESS

CITY

STATE

ZIP

PHONE #

DATE OF BIRTH

AGE

TOTAL HOUSEHOLD INCOME ANNUALLY

ARE YOU REGISTERED WITH DIVISION OF DEVELOPMENTAL DISABILITIES YES NO

DSHS/WELFARE/FOOD STAMPS/FOSTER CARE

YES

NO

NAME OF PARENT/GUARDIAN

E-MAIL ADDRESS

WHAT DO YOU FEEL YOU COULD CONTRIBUTE PER WEEK \$

PLEASE DESCRIBE AND/OR GIVE EXAMPLES WHY THE PARTICIPANT NEEDS ASSISTANCE

INFORMATION FOR UNITED WAY AND HUD MONITORING

ETHNICITY _____ Hispanic _____ Not Hispanic or Latino

RACE

Please fill in one RACE category for each person served:

RACE: _____ American Indian/Alaskan Native _____ Asian

_____ Black/African American _____ Native Hawaiian/Pacific Islander _____ White

Please circle the figure closest to your household's gross yearly income. Income from all sources:

2014 HUD Income Limit Guidelines								
	1 person	2 people	3 people	4 people	5 people	6 people	7 people	8 people
30 %	\$14,050	\$16,050	\$8,050	\$20,050	\$21,700	\$23,300	\$24,900	\$26,500
50 %	\$23,450	\$28,000	\$30,150	\$33,450	\$36,150	\$38,850	\$41,500	\$44,200
80 %	\$37,450	\$42,800	\$48,150	\$53,500	\$57,800	\$62,100	\$66,350	\$70,650
Median	\$46,800	\$53,500	\$60,200	\$66,900	\$72,300	\$77,600	\$83,000	\$88,300

NOTE: Scholarships are not available to families Median and above. The Arc of Tri-Cities accepts monthly payment plans. Please contact 783-1131 ext 107 for more information.

Do you receive DDD Respite Dollars or Family Support Dollars Yes No