

**Indian Prairie School District 204****Application for Fee Waiver for the 2013/2014 School Year for Grade K-12**

ONE APPLICATION FOR ALL FAMILY MEMBERS

<b>Foster Child?</b> Yes or No	If yes, please provide <b>current</b> placement documents from agency and sign this application. There is no need to send additional documentation.
Name and School ID# of Student:	
Name and School ID# of Student:	
Name and School ID# of Student:	
Name of Parent / Legal Guardian: (please print):	
Address:	
Home Phone #:	
Work or Cell Phone #:	
<b>*The income guidelines are the same as the FREE lunch guidelines (<a href="http://www.fns.usda.gov">www.fns.usda.gov</a>)</b>	

In the table below list all members living in household – Include proof of all household income and specify how often it is received.

**SEE ATTACHED SHEET FOR DEFINITION OF INCOME & INCOME GUIDELINES**

List everyone in household	(Column A) How much do you get paid? And how often do you get paid?	(Column B) Disability, welfare, social security, etc.	(Column C) Child support, Alimony, etc.	(Column D) Other (please specify)	Check if NO INCOME – Indicate if minor
<b>Example:</b> Jane Doe	\$1,000/bi-weekly	\$300/month	\$250/month	SNAP/TANF	

Total **Monthly** Income (Columns A+B+C+D) =

Total # of people in household =

**THE FOLLOWING MUST BE ATTACHED FOR EACH HOUSEHOLD MEMBER RECEIVING INCOME:**

- 1. A COPY OF THE MOST RECENT IRS FORM 1040 (most current federal tax returns for all adults). If no taxes were filed, contact IRS 1-800-829-1040 and request a letter of non-filing.**
- 2. Attach evidence of all current gross income. See pages 1 and 2 for more information.**

I, the undersigned, parent/guardian of \_\_\_\_\_ (name of students)  
hereby request that the School Board of Indian Prairie School District 204 waive the below mentioned fees.

I certify (promise) that all the information on this application is true and correct and that all household income for each member of the household is reported. I understand that school officials may verify (check) the information.

**I am aware that supplying false information to obtain a fee waiver is a Class 4 felony (720 ILCS 5/17-6).**

X

Signature of Applicant

Printed Name of Applicant

Date

**Submit application to:** Attention: Fee Waivers 780 Shoreline Dr. Aurora, IL 60504 OR School Secretary OR [feewaivers@ipsd.org](mailto:feewaivers@ipsd.org)

**\*\*\*Please allow 30 days for processing \*\*\***

FOR OFFICE USE ONLY: Date Received \_\_\_\_\_

Payment Plan \_\_\_\_\_

# Acceptable Evidence for Verification of Income

Families requesting a waiver for instructional fees need to submit an Application of Fee Waiver and the required documentation for review. Waiver forms and instructions with examples of acceptable documentation are included below. You will receive written notification if your waiver request has been granted, placed on hold or denied. If your household income increases by \$50 or more per month (\$600 per year) or your household size decreases, you are obligated to report this change to the District immediately.

Please provide information or documents, which show your household's current income (see following page for definition of income), specifically the gross income for each working household member or evidence of participation in government aid programs. **COPIES OF THE MOST RECENT IRS FORM 1040 ARE REQUIRED FOR EACH WORKING HOUSEHOLD MEMBER.** Examples of types of documents are listed below. Documentation for each source of income listed on your application is required. Any income intentionally not reported to the District will automatically disqualify your application. In addition, you may be asked to provide property tax bills, bank statements, credit card statements, rental/lease agreement, or mortgage statements.

## Earnings/Wages/Salary (provide most recent consecutive two pay stubs):

- ☐ Pay stub dated \_\_\_\_\_ Received how often (ex: weekly) \_\_\_\_\_
- ☐ Letter from employer on letterhead indicating hourly worker's name, SS#, gross wages and frequency of payment.

## Self-Employment Income:

- ☐ Self-employment – income tax verification, business ledger
- ☐ Self-issued paycheck stub on pre-printed checks
- ☐ Copy of incorporation papers listing officers and/or principal stockholder
- ☐ Copy of quarterly payments to IRS

## Food Stamp/SNAP/TANF:

- ☐ Food stamp certification notice
- ☐ Letter from welfare office
- ☐ Name of person receiving benefit: \_\_\_\_\_  
Dollar amount: \$ \_\_\_\_\_  
Beginning and ending dates: \_\_\_\_\_ to \_\_\_\_\_

## Social Security/Pension/Retirement:

- ☐ Social security benefit letter
- ☐ Statement of benefits received
- ☐ Pension award notice
- ☐ Disability award letter or check stub

## Unemployment Compensation:

- ☐ Notice of eligibility from State Unemployment Office

## Welfare Payments:

- ☐ Government aid benefit letter
- ☐ Statement of purpose of benefit

## Child Support/Alimony:

- ☐ Child support pay stubs
- ☐ Court decree
- ☐ State Disbursement Website print out /Canceled checks from spouse

**Other Income:** If you have other forms of income, please provide information or documents which show the amount of income received, how often it is received, and the date it is received.

- ☐ Canceled checks for outside financial aid
- ☐ Notarized letter from person giving monthly aid

**No Income:** If you have no income, please provide a letter explaining how you provide food, clothing, and housing for your household.

**Fees that will not be waived:**

**Yearbook, cap & gown, P.E. locks, lost materials, replacement ID's or planners, school dances, lost equipment, parking permits, overnight trips, summer school etc.**

**(This list is not all inclusive. If you have questions about a specific fee, please contact your school. )**

If your application is denied, the reason(s) for denial will be stated and you may appeal the decision. Your appeal request must be in writing and must be received within 30 calendar days of receipt of denial letter. Full payment of instructional fees is expected and due by September 1<sup>st</sup> unless a payment plan is established. If you need to complete a payment plan, please contact [feewaivers@ipsd.org](mailto:feewaivers@ipsd.org) or 630-375-3770.

**Any questions regarding the fee waiver process may be directed to your child's school, the Fee Waiver Hotline at 630-375-3770 or [feewaivers@ipsd.org](mailto:feewaivers@ipsd.org)**

**Federal definition of income:**

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 or 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.

**\*\*\*Please allow 30 days for processing \*\*\***