



2023-24 Family Income Survey

Dear Parent/Guardian:

To ensure all students have equitable access to a high-quality public education, schools receive additional education funding based on the number of enrolled students who are from households that are at or below designated income levels. The Family Income Survey collects household income information that is used to see what additional funding the school might qualify for. The information provided may also qualify your student for additional supports. It is important that you complete this survey.

Part 1. ELIGIBILITY: Figure out your total household income. Then look at the income chart below. Find your household size. **If your total household income is equal to or less than the amount listed for your household size, check the box.**

Income Chart
Effective from July 1, 2023 through June 30, 2024

Check box that applies	Household Size	Income				
		Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
<input type="checkbox"/>	1	\$26,973	\$2,248	\$1,124	\$1,038	\$519
<input type="checkbox"/>	2	\$36,482	\$3,041	\$1,521	\$1,404	\$702
<input type="checkbox"/>	3	\$45,991	\$3,833	\$1,917	\$1,769	\$885
<input type="checkbox"/>	4	\$55,500	\$4,625	\$2,313	\$2,135	\$1,068
<input type="checkbox"/>	5	\$65,009	\$5,418	\$2,709	\$2,501	\$1,251
<input type="checkbox"/>	6	\$74,518	\$6,210	\$3,105	\$2,867	\$1,434
<input type="checkbox"/>	7	\$84,027	\$7,003	\$3,502	\$3,232	\$1,616
<input type="checkbox"/>	8	\$93,536	\$7,795	\$3,898	\$3,598	\$1,799
<input type="checkbox"/>	For each additional household member, add:	\$9,509	\$793	\$397	\$366	\$183
<input type="checkbox"/>	Household does not qualify					

HOUSEHOLD is defined as all persons, including parents, children, grandparents, and all people related or unrelated who live in your home and share living expenses. If you're applying for a household with a foster child, you may include the foster child in the total household size.

HOUSEHOLD INCOME is considered to be any taxable income each household member received before taxes. This includes wages, social security, pension, unemployment, welfare, child support, alimony, and any other cash income. If including a foster child as part of the household, you must also include the foster child's personal income. Do not count foster payments as income.

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Part 2. STUDENTS: Please list all students living with you that are attending school. **One Survey per household.**

Student's Last Name	Student's First Name	MI	Date of Birth	School	Grade

Part 3. SIGNATURE: I promise that the information on this income survey is true and that all income is reported. I understand that my child's school may qualify for additional state and federal funds based on the information I give. I understand that school officials may check this information. I understand my child's income status may be shared with other programs or agencies to support my child's education as allowed by law.

Signature: _____ Print Name: _____
 Date: _____ Phone: _____ Email: _____
 Address: _____ City: _____ State: _____ Zip: _____

Please return form to any school office or the Nutrition Services Department at 22300 E Wellesley, Otis Orchards, WA 99027.

East Valley School District does not discriminate in any programs or activities based on sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity, disability, or the use of a trained dog guide or service animal and provides equal access to the Boy Scouts and other designated youth groups. The following employees have been designated to handle questions and complaints of alleged discrimination; Title IX Compliance Coordinator: Brian Talbott, Phone: (509) 924-1830, talbottb@evsd.org; ADA/Civil Rights Compliance Coordinator: Jane Stencel, Phone: (509) 924-1830, stencelj@evsd.org; Section 504 Coordinator: Heather Awbery, Phone: (509) 924-1830, awberyh@evsd.org, 3830 N. Sullivan Rd, Bldg. 1, Spokane Valley, WA 99216.



**CONSENT TO SHARE PROGRAM ELIGIBILITY INFORMATION
FOR OTHER SCHOOL PROGRAMS
2023-24 School Year**

If your student **qualifies** for free or reduced-price meals based on household size and income (Family Income Survey), or receives Basic Food, Temporary Assistance for Needy Families (TANF), Food Distribution on Indian Reservations (FDPIR), or has been Directly Certified for meal benefits, their fees may be waived for other school programs.

Submitting/not submitting this form will not affect your child's ability to receive free meals under EVSD's CEP (Community Eligibility Program) status.

Check the box for each program you authorize eligibility status to be shared and sign the form.

Check to participate	Title of school program	How the shared information will be used
<input type="checkbox"/>	AP/SAT/ACT Tests	Waive Fees for Qualified Families
<input type="checkbox"/>	Club Dues	Waive Fees for Qualified Families
<input type="checkbox"/>	ASB Cards	Waive Fees for Qualified Families
<input type="checkbox"/>	Field Trips	Waive Fees for Qualified Families
<input type="checkbox"/>	Athletic Fees	Waive Fees for Qualified Families
<input type="checkbox"/>	All the above	Waive Fees for Qualified Families

One Consent Form per household.

Student Name(s):	School	Grade

Printed name of Parent/Guardian: _____

Signature of Parent/Guardian: _____ Date: _____

Please return form to any school office or the Nutrition Services Department at 22300 E Wellesley, Otis Orchards, WA 99027. Families using **Final Forms** (EVHS and EVMS) that have included all students in the household do not need to complete this form.

This institution is an equal opportunity provider.



Board of Directors: Theresa Noack, District 1; Laura Gates, District 2; Justin Voelker, District 3; Jonathan Horsley, District 4; Mike Bly, District 5 **Superintendent:** Brian Talbott

3830 N. Sullivan Rd., Bldg. 1, Spokane Valley, WA 99216 Phone: 509.924.1830
Fax: 509.927.9500

August 9, 2023

Dear Parent/Guardian:

East Valley School District is participating in a federal program available to select schools as part of the National School Lunch and School Breakfast Program called **Community Eligibility Provision (CEP)**. This means that all students attending East Valley School District are eligible to receive breakfast and lunch at no charge throughout the 2023-2024 school year, regardless of family or household income. However, some of the education programs the district provides are funded from state dollars that require our district to collect household information for all students attending CEP schools.

Please take a moment to complete the included **Family Income Survey and Consent to Share** forms and return them to your student's school or the Nutrition Services office.

Exceptions;

- If you have received an email confirmation from EVSD Nutrition Services that all of your student(s) have qualified for free meals through the Direct Certification system, you only need to complete the Consent to Share form.
- Families using Final Forms (EVHS and EVMS) that have included all students in the household do not need to complete either paper form.

Thank you in advance for your cooperation in this important matter. If you have any questions, please contact Denita Donnelly at 509-241-5905.

Sincerely,

Jennifer Witting
Nutrition Services Director