

LCFF Funding Data Collection Form – Johnstonville Elementary School District - 2021-2022
 (Please Fill out ONE form per family.)

Household Last Name: _____ Phone: _____ E-mail: _____

PART I: Fill in the following information for children living in your household

Name of Child(ren) attending a California K-12 Public School			School Attending	Birth Date	Grade Level
Last	Middle	First			
1.					
2.					
3.					
4.					
5.					
6.					

PART II: Fill in the following for Household Size and Household Income

Based on your household size, check the appropriate box if your total monthly household income is within the range displayed for Category 1, Category 2, or Category 3. **Do not check an income in all categories. (The income range you check should be in the same row as the household size.)**

Household Size	Category 1 – Monthly Household Income is Within This Range:	Category 2 – Monthly Household Income is Within This Range:	Category 3 – Monthly Household Income is Within This Range:
1	\$0 – 1,396 <input type="checkbox"/>	\$1,396 – 1,986 <input type="checkbox"/>	\$1,986 and above <input type="checkbox"/>
2	\$0 – 1,888 <input type="checkbox"/>	\$1,888 – 2,686 <input type="checkbox"/>	\$2,686 and above <input type="checkbox"/>
3	\$0 – 2,379 <input type="checkbox"/>	\$2,379 – 3,386 <input type="checkbox"/>	\$3,386 and above <input type="checkbox"/>
4	\$0 – 2,871 <input type="checkbox"/>	\$2,871 – 4,086 <input type="checkbox"/>	\$4,086 and above <input type="checkbox"/>
5	\$0 – 3,363 <input type="checkbox"/>	\$3,363 – 4,786 <input type="checkbox"/>	\$4,786 and above <input type="checkbox"/>
6	\$0 – 3,855 <input type="checkbox"/>	\$3,855 – 5,486 <input type="checkbox"/>	\$5,486 and above <input type="checkbox"/>
7	\$0 – 4,347 <input type="checkbox"/>	\$4,347 – 6,186 <input type="checkbox"/>	\$6,186 and above <input type="checkbox"/>
8	\$0 – 4,839 <input type="checkbox"/>	\$4,839 – 6,886 <input type="checkbox"/>	\$6,886 and above <input type="checkbox"/>

If household size is greater than 8, list household size and total monthly income below:

Household Size: _____ Total Monthly Income: \$ _____

If your total monthly household income exceeds the ranges above, check here:

PART III: Signature

I certify (promise) that the information provided on this form is true and that I included all income. I understand that the school may receive state and federal funds based on the information I provide and that the information could be subject to review.

 Signature of adult household member completing this form

 Date

 Printed name of adult household member completing this form

The information submitted on this form is a confidential educational record and is therefore protected by all relevant federal and state privacy laws that pertain to educational records including, without limitation, the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended (20 U.S.C. § 1232g; 34 CFR Part 99); Title 2, Division 4, Part 27, Chapter 6.5 of the California Education Code, beginning at Section 49060 et seq.; the California Information Practices Act (California Civil Code Section 1798 et seq.) and Article 1, Section 1 of the California Constitution.

Who should I include in “Household Size”?

You must include yourself and all people living in your household, related or not (for example, children, grandparents, other relatives, or friends) who share income and expenses. If you live with other people who are economically independent (for example, who do not share income with your children, and who pay a pro-rated share of expenses), do *not* include them.

What is included in “Total Monthly Household Income”? Total Monthly Household Income includes all of the following:

- **Gross earnings from work:** Use your gross income, not your take-home pay. Gross income is the amount earned before taxes and other deductions. This information can be found on your pay stub or if you are unsure, your supervisor can provide this information. Net income should only be reported for self-owned business, farm, or rental income.
- **Welfare, Child Support, Alimony:** Include the amount each person living in your household receives from these sources, including any amount received from CalWORKs.
- **Pensions, Retirement, Social Security, Supplemental Security Income (SSI), Veteran’s benefits (VA benefits), and disability benefits:** Include the amount each person living in your household receives from these sources.
- **All Other Income:** Include worker’s compensation, unemployment or strike benefits, regular contributions from people who do not live in your household, and any other income received. Do not include income from CalFresh, WIC, federal education benefits and foster payments received by your household.
- **Military Housing Allowances and Combat Pay:** Include off-base housing allowances. *Do not* include Military Privatized Housing Initiative or combat pay.
- **Overtime Pay:** Include overtime pay **ONLY** if you receive it on a regular basis.

If your income changes, include the wages/salary that you regularly receive. For example, if you normally make \$1,000 each month, but you missed some work last month and made \$900, put down that you made \$1,000 per month. Only include overtime pay if you receive it on a regular basis. If you have lost your job or had your hours or wages reduced, enter zero or your current reduced income.

For additional information on Household Size and Gross Household Income, please see the Eligibility Manual for School Meals on the U.S. Department of Agriculture Guidance and Resource Web page at <http://www.fns.usda.gov/cnd/guidance/default.htm>.

CA Dept. of Education
Rev. April 2015