

Waukegan Community Unit School District # 60

Application for Fee Waiver for the 2019 - 2020 School Year

Submit to the Lincoln Center located at: 1201 N Sheridan Road, Waukegan, IL 60085.

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|---|--------------|--|---------------------------|---|-------------|
| Name of Parent / Legal Guardian (please print): | | Homeless <input type="checkbox"/> Homeless Consultant Signature: _____ | | | Date: _____ |
| Home Address: | | _____ | | | |
| Phone: | | Home#: | Cell#: | Work#: | |
| Student Name | Student ID # | School Attending | SNAP or TANF Case Number: | Foster Child? Yes or No <small>(If Yes, provide current placement documents from agency)</small> | |
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In the table below list all members living in household – Include all household income and specify how often it is received.

Federal definition of income: any monies earned before any deduction 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 estate 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 pension 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 Other cash income would include cash amounts received or withdrawn from any source including savings; investments, trust accounts, and other resources which would be available to pay the price of a child's meal.

| List everyone in household | Earnings from work before deductions | Disability, welfare, social security, etc. | Child support, Alimony, etc. | Other (please specify) | Check if NO INCOME – Indicate if minor |
|----------------------------|--------------------------------------|--|------------------------------|-------------------------|--|
| Example: Jane Doe | \$200 / weekly | \$150 / weekly | \$100 / monthly | \$50 / Mo from relative | |
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THE FOLLOWING MUST BE ATTACHED FOR EACH WORKING HOUSEHOLD MEMBER:

1. A COPY OF THE TWO MOST RECENT PAYSTUBS from employer OR A COPY OF THE MOST RECENT IRS FORM 1040 (most current federal tax returns for all adults)
2. Attach evidence of current gross income.

I, the undersigned, parent/guardian of the aforementioned students hereby request that the School Board of Waukegan Public Schools District #60 waive the appropriate registration 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).

Printed Name of Applicant: _____

Signature of Applicant: _____

Date: _____

| | | | |
|--|---|--|---|
| <p>ADMINISTRATIVE USE ONLY:</p> <p>Signature _____</p> <p>Date Processed _____ Effective Date _____</p> | <input type="checkbox"/> Waiver Granted | <input type="checkbox"/> Waiver Denied – does not meet eligibility | <input type="checkbox"/> Waiver Denied – incomplete application |
|--|---|--|---|