



USD 261

HAYSVILLE SCHOOLS

2021 - 2022

HOUSEHOLD ECONOMIC FORM

The information given will be used to determine whether the school district is eligible to receive specific state and federal funding, and individual data may be used to provide fee waivers and/or other services for individual students. By filling out this form, you are helping to ensure that the school district receives the funding to which it is entitled.

Total number of people in household (include all adults and children living in the home)

Total annual (yearly) income for ALL people in the household BEFORE ANY DEDUCTIONS for taxes, insurance, medical expenses, child support, etc.

\$ _____

List all students, school, grade, and date of birth below.

Student Name	School	Grade	Date of Birth

I certify (promise) that all information on this form is true and that all income is reported. I understand that the school will receive federal and state funding based on the information provided. I understand that school officials may verify (check) the information.

Signature of Parent/Guardian (REQUIRED) : _____ Date: _____

Printed Name: _____

Address: _____



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CONSENT FOR DISCLOSURE

With your permission, information given on the Household Economic Survey can be shared with other USD 261 district departments to save you time and effort. The information shared will be used to determine if the students listed on the previous page are eligible to receive waivers for various school district fees. If you would like the information shared, you must check "Yes" below and which fees you would like to receive waivers for (if approved).

Yes, I DO want school officials to use the information provided above to determine eligibility to receive waivers for the following school fees I have checked below.

- Enrollment Fees
- Technology & Instructional Material Fees
- Participation Fees (Athletic)
- Program Support Fee (SPARK, GEAR UP, ECC)
- Scholarships
- Instrument Rental Fees
- NCAA & NAIA Clearinghouse Fees
- HS & MS Standardized Test Fees (ACT, SAT, PSAT, AP, WorkKeys)

Signature of Parent/Guardian (REQUIRED) : _____ Date: _____

Printed Name: _____

Address: _____

For School Use Only:	<input type="checkbox"/> Free	<input type="checkbox"/> Reduced	<input type="checkbox"/> Not Eligible
Comments:			