

Dakota Christian School

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Dear Parents,

The attached income survey will be used to determine funding for Dakota Christian School received through the public school. It also will be used to determine E-rate funding (for discounts on internet service).

Please fill out the form, and **return to school with your other registration forms.**

This information will remain confidential and will be reported only as a total group, not by individual families, and will not be used for any other purposes except to determine funding eligibility.

We need everyone to return this survey—not just those families that fall within the income levels described—in order for the survey to be considered valid.

Thanks for your participation in helping DCS to use its resources in the best way to serve all students. In you have any questions, please call our office at 243-2211.

Dakota Christian School



Family Income Survey – 2018-2019

Please complete and return the survey below. **Important: Even if your income does not meet these Income Eligibility Guidelines, you must return the survey** in order for the school's survey to be considered a valid measure.

Family Name _____
(Please Print)
Address _____

I. Determining Eligibility—To calculate income see the chart on the back of this sheet

Is your income equal to or less than the guidelines listed on the chart for your household size? Yes____ No____

Is your family eligible for Supplemental Nutrition Assistance Program? Yes____ No____

Does your family qualify for medical assistance under Medicaid? Yes____ No____

Does your family receive federal housing assistance (sect. 8)? Yes____ No____

Does your family receive home energy assistance (LIHEAP)? Yes____ No____

Does your family receive Supplementary Security Income (SSI)? Yes____ No____

II. If you answered **no to all** of the preceding questions, stop here, sign and date:

Signature_____ Date_____

III. If you answered **yes to any** of the preceding questions, please list the names of each child presently attending during the 2018-19 school year.

Kdg. _____ 1st _____ 2nd _____ 3rd _____

4th _____ 5th _____ 6th _____

7th _____ 8th _____

9th _____ 10th _____ 11th _____ 12th _____

Eligible Kindergarten child/ren for the 2019-2020 school year _____

Signature_____ Date_____

(The results of this survey will be kept confidential. The income guidelines are for free/reduced lunches for the National School Lunch Program, but DCS students are currently not able to enroll in that government program. Please call the school office at 243-2211 if you have any questions.)

Return the completed survey at registration

INCOME GUIDELINES:

FEDERAL ELIGIBILITY INCOME CHART For School Year 2018-2019			
Household size	Yearly	Monthly	Weekly
1	12,140	22,459	1,872
2	16,460	30,451	2,538
3	20,780	38,443	3,204
4	25,100	46,435	3,870
5	29,420	54,427	4,536
6	33,740	62,419	5,202
7	38,060	70,411	5,868
8	42,380	78,403	6,534
For each add'l family	4,320	7,992	666

(185% poverty guidelines used to determine eligibility for reduced price meals included in the National School Lunch Program.)

Look at the Income Guidelines chart. Find your household size. HOUSEHOLD is: All persons, including parents, children, college students, grandparents, and all people related or unrelated who live in your home and share living expenses. Find your total household income. TOTAL HOUSEHOLD INCOME is the income each household member got last month before taxes. This includes wages, social security, pension, unemployment, welfare child support, alimony, and any other cash income.

DETERMINING INCOME - If a household reports income sources at more than one frequency, the preferred method is to annualize all income by multiplying weekly income by 52, income received every 2 weeks by 26, income received twice a month by 24, and income received monthly by 12. Do not round the values resulting from each conversion.

To figure income for farm/self-employed: The information to figure income from private business operation is to be taken from your U.S. Individual Income Tax Return – Form 1040. Write the numbers from the corresponding tax form lines in the spaces below. Net loss carryover cannot be used to decrease the household income.

<u>Proprietorship Income</u>	<u>Farm Income</u>	<u>Partnership Income</u>
Line 12 \$ _____	Line 13 \$ _____	Line 13 \$ _____
Line 13 \$ _____	Line 14 \$ _____	Line 14 \$ _____
Line 14 \$ _____	Line 17 \$ _____	Line 17 \$ _____
TOTAL \$ _____	Line 18 \$ _____	TOTAL \$ _____
	TOTAL \$ _____	

INCOME TO REPORT

Earnings from Work

Wages/salaries/tips

Strike benefits

Unemployment compensation

Worker's compensation

Welfare/Child Support/Alimony

Public assistance payments

Alimony/child support payments

Farm/Other Monthly Income

Disability benefits

Cash withdrawn from savings

Interest/dividends

Income from estates/trusts/investments

Regular contributions from persons not living in the same household

Net royalties/annuities/net rental income

Use chart above to figure income from farm, self-owned business, day care business

Any other income

Pensions/Retirement/Social Security

Pensions

Supplemental Security Income

Veteran's payments

Social Security

Children's Income

Do not include income from a child's occasional work such as lawn mowing, babysitting, cleaning walks, etc. A child's income from regularly scheduled jobs must be included.