**2019-2020 TITLE I INCOME VERIFICATION FORM**

Please read and complete the information in the section that best applies to your situation.

**SECTION 1:**

HOUSEHOLDS RECEIVING SNAP OR TANF – COMPLETE THIS SECTION

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| SNAP or TANF Case Number |  |  |  |  |  |  |  |  |  |  |
|  |

Total number of kindergarten through sixth (K-6) grade children in your household attending this

private school during the 2018-2019 school year: \_\_\_\_\_\_\_\_\_\_\_

Total number of 7th-12th grade children zoned to attend Cocoa High School, Southwest Middle School, or

James Madison Middle School in your household attending

 this private school during the 2018-2019 school year: \_\_\_\_\_\_\_\_\_\_\_

**SECTION 2:**

HOUSEHOLD MEMBERS AND MONTHLY INCOME – If you completed Section 1, do not complete

this section. Gross income is income before any deductions. Income must include salaries, welfare, child support, alimony, pensions, retirement, Social Security or any other income.

|  |  |
| --- | --- |
| Total number of persons in household |  |
| Total Gross yearly income |  |
| **or** |  |
| Total Gross monthly income |  |
| **or** |  |
| Total Gross weekly income |  |

Total number of kindergarten through sixth (K-6) grade children in your household attending this

private school during the 2018-2019 school year: \_\_\_\_\_\_\_\_\_\_

Total number of 7th-12th grade children zoned to attend Cocoa High School, Southwest Middle School, or

James Madison Middle School in your household attending

 this private school during the 2018-2019 school year: \_\_\_\_\_\_\_\_\_

This form has been numbered to protect your privacy. Any information provided will be treated confidentially. Federal requirements for accountability do require occasional review of this survey information. All reviews of this form will be done under the supervision of the custodian of this form. The school may request from you certain documentation to verify and meet federal audit requirements.

# FOR DISTRICT USE ONLY – DO NOT WRITE BELOW THIS LINE

THIS SURVEY IS APPROVED FOR TITLE I FUNDING 🞏

THIS SURVEY IS **NOT** APPROVED FOR TITLE I FUNDING 🞏

 Signature of Determining Official Date