Application For Fee Waiver

(To be submitted to the Food Service Director)

This application for a school fee waiver is completely independent from the District process for determining eligibility for free meals. The information must be provided for your application to be considered. Submit completed application and income verification documents to the District Office.

Student's Name (please print)	School
Parent/Guardian Name (please print)	
Address (please print)	
1. The student named above lives in my household? If you answered "No" to the previous question, please school fees.	Yes No indicate the reason(s) you are applying for a waiver of
2. Total number of people living in my home	·
Total gross annual household income (before dedu home	ctions) from all people living in my
\$	
Income includes all:	

- Compensation for services, wages, salary, commissions or fees;
- Net income from self-employment;
- Social Security;
- Dividends or interest on savings or bonds or income from estates or trusts;
- Net rental income:
- Public assistance or welfare payments;
- Unemployment compensation;
- Government civilian employee or military retirement, or pensions or veterans payments;
- Private pensions or annuities;
- Alimony or child support payment;
- Regular contributions from persons not living in the household;
- Net royalties; and
- Other cash income (including cash amounts received or withdrawn from any source, including savings, investments, trust accounts and other resources).

<u>Income Verification for Fee Waiver</u>		
You must present the following documents to	verify income:	
- 2014 Federal Tax Return	OR	- Direct Certification letter
Plus one of the following:		- Foster placement papers
Two current pay stubs for all working men		
Unemployment statement showing benefit	S	
Disability showing benefits		
You may be requested to provide income v calendar days.	erification at any time, bu	t no more often than once every 60
Applications which have been submitted and apply to the quarters after the waiver is appropay all fees for the prior quarters. Fees for education, parking permits, schedule changes	oved. It will be the response extra curricular activities,	sibility of the parent(s)/guardian(s) to behind the wheel portion of driver's
Supplying false information to obtain a	fee waiver is a Class 4 f	Felony (720 ILCS 5/17-6).
I attest that the statements made herein	are true and correct.	
Parent/Guardian (signature)		Date
Parent/Guardian (signature) If the student does not qualify for the f to pay registration fees before t		sibility of the parent / guardian
If the student does not qualify for the f		sibility of the parent / guardian
If the student does not qualify for the f	he first day of school or to	sibility of the parent / guardian o set up a payment plan.
If the student does not qualify for the f to pay registration fees before t	he first day of school or to	sibility of the parent / guardian
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If the student does not qualify for the f to pay registration fees before t For Office Use Only Rationale if denied:	he first day of school or to	sibility of the parent / guardian o set up a payment plan.
If the student does not qualify for the f to pay registration fees before t For Office Use Only Rationale if denied: Income over the allowable amounts.	the first day of school or to	sibility of the parent / guardian o set up a payment plan.
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This form is retained by the NBCUSD Food Service Director.