

Income Assurance Form

<input type="checkbox"/>	Earnings from work Wages, salaries, tips, commissions, overtime pay, bonuses, income from self-owned business/farm, strike benefits, unemployment, and/or worker's compensation	\$	
<input type="checkbox"/>	Welfare Public assistance and welfare benefits	\$	
<input type="checkbox"/>	Alimony and/or Child Support	\$	
<input type="checkbox"/>	Child's Income Earnings of a child who is a full-time or regular part-time employee, Social Security, and/or supplemental security income	\$	
<input type="checkbox"/>	Retirement Pensions, retirement income, veterans' benefits, Social Security, and/or supplemental security income	\$	
<input type="checkbox"/>	Disability Benefits	\$	
<input type="checkbox"/>	Investment Accounts	\$	
<input type="checkbox"/>	Rental Income Rental income, annuities, and/or royalties	\$	
<input type="checkbox"/>	Interest and Dividend Income	\$	
<input type="checkbox"/>	Inheritance Inheritance, income from estates, trusts, and/or investments	\$	
<input type="checkbox"/>	Contributions Regular contributions from persons not living in the household	\$	
<input type="checkbox"/>	Cash Cash or investment gifts	\$	
<input type="checkbox"/>	Military Military pay not received as a result of the service member's deployment to/service in an area that has been designated as a combat zone and/or military pay that is received prior to the service member's deployment to/service in an area designated as a combat zone	\$	
<input type="checkbox"/>	Life Insurance Benefits	\$	
<input type="checkbox"/>	Living Allowance Money given to a family for house payments and other living expenses	\$	
Total		\$	

I attest that:

- I have provided the Choice school with all financial information included in our household income.
- I have provided documentation to support all amounts listed above as part of our household income.
- If it is discovered that I have not disclosed all information for the household income, my child's Choice application and eligibility may be revoked.

Signature of Parent/Guardian

Date

Printed Name of Parent/Guardian