



Bayshore Preparatory Charter School

1175 Linda Vista Drive
San Marcos CA 92078
phone (760)471-0847
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2014 - 2015 NSLP Worksheet

Student First Name:	Student Middle Name:	Student Last Name:
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Our school may qualify for various federal and state grants this year. By taking time to fill out this income survey, you can help us provide the additional resources necessary to serve all of our students. It is our goal to provide students with the best opportunity to learn that we can offer, but we need your help. Generally, schools whose families have eligible incomes based on the free and reduced lunch programs may qualify for special grants. Please note that these grants are only based upon the number of students that would qualify for free and reduced lunch programs if such a program was offered, even when school lunch programs are not available. Please review the eligibility requirements; if you would be eligible, please return this questionnaire.

Step 1: Circle Family Size and fill in number below chart

Step 2: Circle the estimated yearly combined income for everyone in the household* (and fill in blank below chart)

Household Size	Annual Income	Annual Income	Annual Income	Annual Income
1	\$0 to \$11,670	\$11,671 to \$15,171	\$15,172 to \$21,590	\$21,591+
2	\$0 to \$15,730	\$15,791 to \$20,449	\$20,450 to \$29,101	\$29,102+
3	\$0 to \$19,790	\$19,791 to \$25,727	\$25,728 to \$36,612	\$36,613+
4	\$0 to \$23,850	\$23,851 to \$31,005	\$31,006 to \$44,123	\$44,124+
5	\$0 to \$27,910	\$27,911 to \$36,283	\$36,284 to \$51,634	\$51,635+
6	\$0 to \$31,970	\$31,971 to \$41,561	\$41,562 to \$59,145	\$59,146+
7	\$0 to \$36,030	\$36,031 to \$46,839	\$46,840 to \$66,656	\$66,657+
8	\$0 to \$40,090	\$40,091 to \$52,117	\$52,118 to \$74,167	\$74,168+

Household Size: _____

***Annual Household Income:** _____

Assistance Programs - Choose one of the following: none snap calworks fdpir

If a program was circled above, please enter the casenumber: _____

* Annual household income: write in yearly gross earnings (before deductions) from work for all household members. (Include any income received by a child from full-time or regular part-time employment. Include income received for a child from SSI, Welfare, Child Support, or Adoption Assistance Payments.)

Should the fields checked and circled above indicate that my student is eligible/qualified for the National School Lunch Program, I choose to NOT-PARTICIPATE.

Office Use Only: Eligibility		Reviewed By:		
<input type="checkbox"/> FPL	<input type="checkbox"/> Free	<input type="checkbox"/> Reduced	<input type="checkbox"/> Eligible but choosing Non-Participation	<input type="checkbox"/> Not Eligible

I certify that all of the statements and information given above are true and correct to the best of my knowledge:

X _____
Parent Signature

X _____
Date