



### Family Survey

Find and circle your family size and the annual gross income level listed beside it on the chart printed below. The amounts are the gross income levels.

INCOME CHART			
Family Size	Annual	Monthly	Weekly
1 *	23,107	1,926	445
2	31,284	2,607	602
3	39,461	3,289	759
4	47,638	3,970	917
5	55,815	4,652	1,074
6	63,992	5,333	1,231
7	72,169	6,015	1,388
8	80,346	6,696	1,546
For each additional family member add	+8,177	+682	+158

\* This may be a foster child, an emancipated youth, or a special education child over age 18.

Please Note: If you are paid on a weekly or monthly basis, please multiply this amount into an annual figure for comparison based on the weeks or months you actually work each year.

- A) Is your annual income less than this amount? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Is your family eligible for food stamps? Yes \_\_\_\_\_ No \_\_\_\_\_
- B) Are you receiving TANF Cash Assistance? Yes \_\_\_\_\_ No \_\_\_\_\_  
*(Temporary Assistance for Needy Families, formerly AFDC or Public Assistance)*
- C) Are any of your children eligible to receive medical assistance under the Medicaid program? Yes \_\_\_\_\_ No \_\_\_\_\_
- D) Please check "yes" in this box if you do not wish to share this information in writing. Yes \_\_\_\_\_

Family Name (*print*) \_\_\_\_\_

Address \_\_\_\_\_

Public school district in which you reside \_\_\_\_\_

Name of School your child(ren) would attend in public school \_\_\_\_\_

List name(s) and grade level(s) of your child/children attending Saint Joseph High School

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