



Colorado Virtual Academy
11990 Grant Street
Suite 402
Northglenn, CO 80233

Ph. 866.339.6814
Fx. 877.554.1088
www.covcs.org

2010–2011 Family Data Survey for Alternate Program Funding/Eligibility

Please complete a separate survey for each of your children attending this school. Complete the information, sign your name, and return survey to the school. Completion of this PART IV is voluntary, but may assist the school in receiving additional state/federal funding, or other benefits for your student. Detailed instructions can be found on the back of this document.

last name(s) of family

mailing address, city, zip code

telephone number

Student Information (PARTS I–III)

Please print the child's name, school, and grade. Use a separate survey for each child.

PART I – Student's Legal Name: _____
last first middle

School Name: _____ Grade: _____

PART II – Food Stamp Case Number: _____ (Do not list the 16-digit Quest number)

If you listed a Food Stamp Case Number, please skip to PART V – Signature.

PART III – Foster Child: ☐ (If YES, check here.)

If this is a child who is the legal responsibility of a welfare agency or court, list the amount of the child's personal use monthly income:

\$ _____ (Write "0" if the child has no personal use income); please skip to PART V – Signature.

PART IV – Total Income from Last Month

List everyone in the household not listed under PART I – Student Information.

Name	LIST LAST MONTH'S GROSS MONTHLY INCOME				
	Earnings from work before deductions	Welfare, child support, alimony	Pensions, retirement, Social Security	Other	
	\$	\$	\$	\$	<input type="checkbox"/>
	\$	\$	\$	\$	<input type="checkbox"/>
	\$	\$	\$	\$	<input type="checkbox"/>
	\$	\$	\$	\$	<input type="checkbox"/>
	\$	\$	\$	\$	<input type="checkbox"/>
	\$	\$	\$	\$	<input type="checkbox"/>

PART V – Signature (An adult household member must sign this survey.)

I certify (promise) that all information on this application is true and that all income is reported. I understand that the school may get state or federal funds based on the information I give. I understand that school officials may verify (check) the information.

Signature of Parent/Guardian: _____ Date: _____

FOR SCHOOL USE ONLY

(Monthly Income Conversion: Weekly = x 4.33; Every 2 weeks = x 2.15; and Twice a Month = x 2)

Monthly Income: _____ Household Size: _____ FS: _____ Date Withdrawn: _____

Eligibility: ☐ Yes (type: ____) ☐ No ☐ Declined survey

Determining Official's Signature: _____ Date: _____

Student's Name:

Student's Home Phone:

Instructions

This survey is used by the Adams County School District to maximize available funding from state and federal sources, as well as to provide certain other benefits that may be available for your child. In many cases, the eligibility for these funds and programs is linked to whether or not your child is currently eligible for free or reduced price meals in the federal School Lunch (and Breakfast) programs.

Colorado Virtual Academy does not participate in the federal School Lunch or Breakfast programs; for that reason, we are asking that you complete the attached survey as an alternate means of qualifying your child's school for state and federal programs that will provide much-needed funding. Additionally, this may also qualify your child for certain other benefits. (optional: describe)

Use the following guidelines to complete one survey for each child you have at this school:

If your household gets FOOD STAMPS, follow these instructions:

Part 1: List your child's name, school, and grade.

Part 2: List your Food Stamp case number (not your Quest Card number).

Part 3: Skip this part.

Part 4: Skip this part.

Part 5: Sign the form.

If your child is a FOSTER CHILD, follow these instructions:

Part 1: List the child's name, school, and grade.

Part 2: Skip this part.

Part 3: List the child's personal use monthly income, if any.

Part 4: Skip this part.

Part 5: Sign the form.

ALL OTHER HOUSEHOLDS follow these instructions:

Part 1: List child's name, school, and grade.

Part 2: Skip this part.

Part 3: Skip this part.

Part 4: Follow these instructions to report total household income from last month.

Column 1 – Name: List the first and last name of each person living in your household, related or not (such as grandparents, other relatives, or friends). You must include yourself and all children not listed in Part 1. Attach another sheet of paper if you need to.

Column 2 – Last month's income and how often it was received: List the types of income the person got last month and how often he/she got it. Employment income: List the gross income each person earned last month. It is not the same as take-home pay. Gross income is the amount earned before taxes and deductions. It should be listed on the pay stub, or the boss can tell you. Next to the amount, write how often the person got it (weekly, every other week, twice a month, or monthly). Other Income: List the total amount each person got last month from all other sources. Include welfare, child support, alimony, pensions, retirement, Social Security, Worker's Compensation, unemployment, strike benefits, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), disability benefits, regular contributions from people who do not live in your household, and ANY OTHER INCOME. Report net income for self-owned business, farm, or rental income. Next to the amount, write how often the person got it.

Column 3 – Check if no income: If the person does not have any income, check the box.

INCOME TO REPORT:

Earnings from work security:

- ☐ Wages/salaries/tips
- ☐ Strike benefits
- ☐ Unemployment Compensation
- ☐ Worker's Compensation
- ☐ Net income from self-owned business or farm

Pensions/Retirements/Social Security:

- ☐ Pensions
- ☐ Supplemental Security income
- ☐ Retirement income
- ☐ Veteran's payments
- ☐ Social Security

Welfare/Child Support/Alimony:

- ☐ Public assistance/welfare payments
- ☐ Alimony/child support payments

Other Income:

- ☐ Disability benefits
- ☐ Interest dividends
- ☐ Cash withdrawn from savings
- ☐ Estate/trusts/investments
- ☐ Regular contributions from person(s) not living in household
- ☐ Net royalties/annuities/net rental income
- ☐ Any other income