

North Boone

Community Unit School District 200

Dr. Michael Greenlee, Superintendent
Julia Saunders, Director of Business Services

Dear Parent or Guardian,

In accordance with Board Policy 4:140 – Waiver of Student Fees, North Boone CUSD #200 will waive student registration fees for parents or guardians whose household income falls within specific guidelines and who can provide evidence of eligibility.

To determine if your family is eligible for a waiver of student fees for the current school year, please complete the enclosed application form and return it **along with appropriate proof of income** (see page 2 of the *Application of Fee Waiver* form for instructions) to our office at:

North Boone CUSD #200
District Office
6248 North Boone School Road
Poplar Grove, IL 61065

Please note: In order to be eligible for a waiver of student registration fees, applications must be received **within thirty (30) days of the date your child(ren) enter(s) school for the current school year**. Fees will not be waived until the *Application of Fee Waiver* form is received, reviewed and approved.

Fees that are not waived include: lost or damaged books, locks, materials, supplies and equipment. Fees for extra-curricular activities, behind the wheel portion of driver's education, parking permits, schedule changes and yearbooks will not be waived. These fees must be paid in full prior to participation in extra-curricular activities, behind the wheel driving, receipt of the parking permit, schedule change or yearbook.

If you have any questions or need help completing the *Application of Fee Waiver* form, please call the District Office at 815-765-3322.

Sincerely,

Julia Saunders
Director of Business Services and Transportation

Enclosure

6248 North Boone School Road, Poplar Grove, IL 61065
815-765-3322 ~ Fax 815-765-2053 ~ www.nbcusd.org

Application For Fee Waiver

Part I- Student Information			
Name of Child (Last name)	First name and middle initial	School Name	Grade

(Skip to Part 4 if you list a SNAP or TANF Case Number)

1. NAMES (list everyone who lives in the household)				2. GROSS INCOME and HOW OFTEN RECEIVED Example: \$100/month: \$100/twice a week; \$100 every other week; \$100/week					
	Earnings from Work Gross Income (before deductions)		Welfare, child Support, Alimony		Pensions, Retirement, Social Security		Worker's Comp. Unemployment, SSI, Etc. (All other incomes)		3. Check if NO INCOME
A.	Amount	How often?	Amount	How often?	Amount	How often?	Amount	How often?	
	\$	/	\$	/	\$	/	\$	/	
B.	Amount	How often?	Amount	How often?	Amount	How often?	Amount	How often?	
	\$	/	\$	/	\$	/	\$	/	
C.	Amount	How often?	Amount	How often?	Amount	How often?	Amount	How often?	
	\$	/	\$	/	\$	/	\$	/	
D.	Amount	How often?	Amount	How often?	Amount	How often?	Amount	How often?	
	\$	/	\$	/	\$	/	\$	/	
E.	Amount	How often?	Amount	How often?	Amount	How often?	Amount	How often?	
	\$	/	\$	/	\$	/	\$	/	

Home Address (number, street, city, zip)

An adult household member must sign the application. Your signature below indicates your agreement with the following: **I certify all information on this application is true and all income is reported. The District has my permission to validate any information submitted.**

Date _____

Date: _____

Instruction for Application of Fee Waiver

- If your household receives SNAP (formerly food stamps) or TANF benefits, follow these instructions:

- Part 1: List child(ren)'s name, school and grade
- Part 2: List SNAP or TANF case number
- Part 3: Skip
- Part 4: Contact Information
- Part 5: An adult household member must sign the form

Please attach documentation that shows you receive SNAP or TANF benefits for your child

_____ SNAP or TANF certification notice showing the dates of the certification period.

_____ Letter from SNAP or welfare office stating you receive SNAP or TANF.

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- If your household does not receive SNAP or TANF benefits, follow these instructions:

Part 1: List child(ren)'s name, school and grade

Part 2: Skip

Part 3: Follow these instruction to report total household income:

- **Section 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, your spouse, and all children living with you. Attach another sheet of paper if necessary.
- **Section 2- Gross income last month and how often received:** next to each person's name, list each type of income received last month and how often it is received. For example, *Earnings from Work* (Column 1) list the **gross income** each person earned from work. This is not the same as take home pay. **Gross Income is the amount earned before taxed and other deductions.** The amount should be listed on your pay stub. Next to the amount, indicate how often the person receives it (weekly, every other week, twice a month, or monthly). **All other income:** List the amount each person received from welfare, child support, or alimony (Column 2); Pensions, retirement, social security (Column 3); and all other income sources (Column 4) such as workers compensation, unemployment strike benefits, Supplemental Security Income (SSI), Veteran's Affairs (VA) benefits, disability, regular contributions from people who do not live in your household, and any other income. Next to the amount, write how often the person receives it. Report net income for self owned businesses, farm, or rental income. If you are in the Military Housing Privatization Initiative, do not include this housing allowance.
- **Section 3- Check if no income:** If the person does not have any income, check here.
- **Section 4- Contact Information:** Provide work and home telephone numbers, and address of residence.
- **Section 5- Signature:** An adult household member must sign and date the form.

Please attach documentation that shows your household's current income

The documentation you send in must show: (1) the amount of income received; (2) the name of the person who received it; (3) the date the income was received; and (4) how often the income is received. Please submit copies of the following documents, as necessary:

ONE CURRENT MONTH OF PROOF OF INCOME MUST BE SUBMITTED

_____ **Earnings/Wages/Salary for each job:** Payroll stub (s) that shows earnings for the most recent month and how often pay is received, current pay envelope that shows how often it is received, or letter from employer stating gross wages and how often they are paid or business or farming papers, such a ledger or tax books.

_____ **Social Security/Pensions/Retirement:** Social Security retirement benefit letter or statement of benefits received or pension award notice.

_____ **Unemployment compensation/disability or worker's compensation:** Notice of eligibility from Sate employment security office or check stub or letter from worker's compensation.

_____ **Welfare Payments:** Benefit letter from welfare agency.

_____ **Child Support/Alimony:** Court decree or agreement or copies of checks received.

_____ **All other Income:** If you have other forms of income (such as rental income), send information or papers that show the amount of income received, how often it is received, and the date received.

_____ **No Income:** If you have no income, send a letter explaining how you provide food, clothing, and housing for your household, and when you expect an income.

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