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## Family Income Survey 2021-2022

| Studen      | t Name   | Student Grade   | Student Date of Birth _  |                                 |
|-------------|--|---|--|---------------------------------|
| Sibling     | s at YES Prep Schools  |   |  |                                 |
| ratings an  | Public Schools is required to collect and report the socion of for federal reporting. Please note that this form is not for the feature of the fea | t sent to the Texas Education Agency and  | that the income levels indicated for you   | ur family are not reported to t |
| 1.          | SECTION A  |   |  |                                 |
| •           | receive Supplemental Nutrition Assi<br>receive Temporary Assistance to Ne  | · · · — _ ·   | □ No<br>⁄es □ No   |                                 |
| If you c    | answered YES on either of the above,   | skip SECTION B and continu  | e to the SIGNATURE section   | on.                             |
| 2.          | SECTION B (Complete only if all answers in SECTION A are NO)   |   |  |                                 |
| How m       | any people live in your household (in  | nclude all adults and childre   | n)?  |                                 |
|             | YEARLY INCOME BEFORE DEDUCTIO Include wages, salary, welfare paym compensation, unemployment and  K ONE INCOME BOX BELOW  No income \$40 \$1 - \$23,828 \$40   | nents, child support, alimony<br>all other sources of income                          | r, pensions, Social Security<br>( <b>before any type of deduc</b>                  | , worker's                      |
|             | \$1 - \$23,828 \$45<br>\$23,829 - \$32,227 \$55<br>\$32,228 - \$40,626 \$65  | 7,425 – \$65,823  | <u>!</u> 2+  |                                 |
| Departme    | SIGNATURE Please check one of the nce with the provisions of the Protection of Pupil Rights at of Education, to submit to a survey, analysis, or evaluation in a program or for receiving financial assistance un  | s Amendment (PPRA) no student shall be i<br>uation that reveals information concernin | equired, as part of any program funded<br>g income (other than that required by lo | aw to determine eligibility for |
| _           | rtify that all the information on this te federal funds and will be rated for a  |   | · · · · · · · · · · · · · · · · · · ·  | and the school will             |
| _           | oose not to provide this information tability rating may be affected by my   |   | ol's disbursement of fede  | ral funds and                   |
| <br>Parent, | /Guardian Name (Print)   | <br>Parent/Guardian S   | <br>iignature  | <br>Date                        |