Ottumwa Community Schools Household Economic Survey

To be considered for a school fee waiver, please provide the following information.

There are _____ people in my household, including all children and adults.

The total annual income for all people in the household before any deductions for taxes, insurance, medical expenses, child support, etc. is _____ per year.

Students:

Name	School	grade
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

____ Additional students are listed on the back of this page. (please indicate with "x")

I certify that the total income for the household reported is accurate.

_____ _____ _____

Signature Date Phone

For School Use Only:

_____ Approved for free waiver

_____ Approved for reduced waiver

_____ Does not qualify for waiver

Approved by: _____