

Community Unit School District 308

Request for Financial Assistance Waiver of Student Fees 2020/2021 School Year (MUST REAPPLY EVERY YEAR)

Name of All Students in household	Grade	School	ID #

PLEASE LIST TOTAL HOUSEHOLD MEMBERS AND GROSS INCOME (BEFORE DEDUCTIONS) – YOU MUST LIST AMOUNT AND FREQUENCY OF EARNINGS

Names of ALL Household Members	Earnings from Work (before deductions)		Welfare, Child Support, Alimony		Pension, Retirement, Social Security		Workers Comp. Unemployment, SSI, Etc.	
	Amount	How Often	Amount	How Often	Amount	How Often	Amount	How Often
	\$		\$		\$		\$	
	\$		\$		\$		\$	
	\$		\$		\$		\$	
	\$		\$		\$		\$	
	\$		\$		\$		\$	
	\$		\$		\$		\$	
	\$		\$		\$		\$	

TOTAL NUMBER OF HOUSEHOLD MEMBERS _____

SD308 requires acceptable documentation be included with this submission. Please see attached instructions for a complete list of acceptable documentation to include. **ANY APPLICATION SUBMITTED WITHOUT ACCEPTABLE INCOME DOCUMENTATION IS CONSIDERED INCOMPLETE AND WILL NOT BE PROCESSED.**

I am aware that supplying false information to obtain a fee waiver is a Class 4 felony (720 ILCS 5/17-6).

Printed Name of Adult Completing Application _____ Date _____ Signature _____

Home Address _____ Home Telephone Number _____

This form will not be accepted after February 1st