Mt. Pleasant SD Alternate Income Form  
School Year 2020-21

Please complete the Alternate Income Form for your student(s). This form is required by the California Department of Education for our schools funding purpose. If you have completed the National School Lunch Program Application for school year 2020-21, you don’t have to fill out this alternate form. This form is very simple and easy to complete. Thank you for taking time to fill it out in order to help our district to obtain the eligible funds to educate our students. If you have any questions or need help, please do not hesitate to contact Micaela Garcia in the Food Service Office at 408-223-3713.

Regards,
Mount Pleasant School District Food Service Department
Household Income Data Collection – MT. PLEASANT ELEMENTARY SCHOOL DISTRICT

Household Last Name: _________________________ Phone: __________ E-mail: _________________

**PART I: Fill in the following information for children living in your household**

<table>
<thead>
<tr>
<th>Name of Child(ren) attending a California K-12 Public School</th>
<th>School Attending</th>
<th>Birth Date</th>
<th>Grade Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
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<tr>
<td>3.</td>
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<tr>
<td>4.</td>
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<tr>
<td>5.</td>
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<tr>
<td>6.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PART II: Fill in the following information for Household Size**

Total number of adults and children in Household:

Circle one:  1  2  3  4  5  6  7  8  Other_____  

See back of this form for information on household size.

**PART III: Fill in the following for each source of Household Income**

<table>
<thead>
<tr>
<th>Household Members</th>
<th>Amount if Paid Weekly</th>
<th>Amount if Paid Twice Per Month</th>
<th>Amount if Paid Every Other Week</th>
<th>Amount if Paid Monthly</th>
<th>Amount if Paid Annually</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
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</tr>
<tr>
<td>2.</td>
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<td>3.</td>
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<tr>
<td>4.</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>All Additional Income</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

Subtotal: $  

Multiply Subtotal by:  

| 52 | 24 | 26 | 12 |

Total Income by Frequency: $  

Total Household Income (sum of all columns): $

**PART IV: Signature**

I certify (promise) that the information provided on this form is true and that I included all income. I understand that the school may receive state and federal funds based on the information I provide and that the information could be subject to review.

Signature of Adult Household Member: _________________________  
Date: __________  
Printed Name of Adult Household Member Completing this Form: _________________________
Who should I include in “Household Size”?

You must include yourself and all people living in your household, related or not (for example, children, grandparents, other relatives, or friends) who share income and expenses. If you live with other people who are economically independent (for example, who do not share income with your children, and who pay a pro-rated share of expenses), do not include them.

What is included in “Total Household Income”? Total Household Income includes all of the following:

- **Gross earnings from work**: Use your gross income, not your take-home pay. Gross income is the amount earned before taxes and other deductions. This information can be found on your pay stub or if you are unsure, your supervisor can provide this information. Net income should only be reported for self-owned business, farm, or rental income.

- **Welfare, Child Support, Alimony**: Include the amount each person living in your household receives from these sources, including any amount received from CalWORKs.

- **Pensions, Retirement, Social Security, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), and disability benefits**: Include the amount each person living in your household receives from these sources.

- **All Other Income**: Include worker’s compensation, unemployment or strike benefits, regular contributions from people who do not live in your household, and any other income received. Do not include income from CalFresh, WIC, federal education benefits and foster payments received by your household.

- **Military Housing Allowances and Combat Pay**: Include off-base housing allowances. Do not include Military Privatized Housing Initiative or combat pay.

- **Overtime Pay**: Include overtime pay ONLY if you receive it on a regular basis.

How do I report household income for pay received on a weekly, twice per month, every other week, monthly, and annual basis?

- For each household member determine the frequency in which income is received (weekly, twice per month, every other week, monthly, or annually) and enter amount in appropriate column. For example, if you are paid twice per month report the gross amount of your paycheck in the appropriate column.

- Repeat these steps for each source of income for each household member. If you have more sources of income than columns provided, report all additional income in the appropriate column.

- Add amounts reported in each column in the subtotal row. Multiply each subtotal by the appropriate number, as indicated on the form.

- Add all columns to determine the Total Household Income.

If your income changes, include the wages/salary that you regularly receive. For example, if you normally make $1,000 each month, but you missed some work last month and made $900, put down that you made $1,000 per month. Only include overtime pay if you receive it on a regular basis. If you have lost your job or had your hours or wages reduced, enter zero or your current reduced income.