New Jersey Department of Education Household Information Survey 2020–2021

County: Cumberland District: City of Bridgeton Public Schools School:



Please complete, sign, and return this form to your child's school.

Part A	A. H	ouseh	old M	embers	5	
				•		

Confirming Official's Signature:_

Fill in the information for every person living in your household (adults & children). For help determining who should be included in the household, see instructions on the second page.

meraded in the modseriola, see mist	i actions on the	secona page						
	Date of			Grade Level	Student Information (mark as applicable)			
List all who live in the household: Names (<i>Last Name, First Name</i>)	Birth XX-XX-XXXX		hool the Student (if applicable)		Migrant	Homeless	Foster	In Head Start
1.								
2.								
3.								
4.								ļ
5.								<u> </u>
6.								1
7. 8.								
* If household size is greater than 8, list	additional househ	old members o	n a senarate naner :	and follow	snocial ins	tructions in Da	rt C	
Part B. Benefits Received (if applic		old illellibers o	ii a separate paper, a	and Ionow	special ills	il uccions in Fa	ii C.	
 If anyone in the household received If you checked a box, write the full Name: Part C. Household Size and Gross I Households with 8 or fewer pe 	Il name (Last, First) Income (before ople: Check a box	and 10-digit cand and and and and and and and and and	ase number of any or Case #: For help determinin Innual Income Range	ne person g your ann that refle	receiving th	e benefit and s see page 2 of al annual hous	the surve	
- If Household Size is greater tha	n 8, DO NOT check	k an income rar	nge, but follow the sp	pecial instr	uctions belo	ow boxes 1 thr	ough 17.	
	Anı	nual Househol	d Income Ranges*					
1. 🗆 \$0-\$16,588 5.	□ \$28,237–\$31	,894	9. 🗆 \$40,183–\$	45,708	13.	□ \$56,759-	\$57,356	
2. 🗆 \$16,589–\$22,412 6.	□ \$31,895–\$34	10. 🗆 \$45,709–\$48,470			14. 🗆 \$57,357–\$65,046			
3. 🗆 \$22,413–\$23,606 7.	7. 🗆 \$34,061–\$39,884		11. 🗆 \$48,471–\$	15.	15. 🗆 \$65,047–\$73,334			
4. 🗆 \$23,607–\$28,236 8.	□ \$39,885–\$40	,182	12. 🗆 \$51,533–\$	556,758	16.	□ \$73,335-	\$81,622	
					17.	□ \$81,623+		
* Special Instructions for household	s with more tha	n 8 people: D	O NOT check the b	oxes abo	ve. Instead	l, fill in items	below:	
Household size (# people):			Total annual I	ncome: \$				
Part D: Certification - The head of h	ousehold or adul	t designee wh	o completed this fo	rm must c	complete th	is certificatio	n section.	. By
marking the box below OR signing belo	ow AND entering	my name in th	ne box next to it, I c	ertify (pro	mise) that	all information	n on this	form
is true and that all income is reported	to the best of my	knowledge. I	understand that thi	is form ma	ay impact t	he amount of	f State or	
Federal funding allocated to my local Sign Here: X					-			
Last Four (4) Digits of Social Security Nun	nber (Optional): XX	X-XX						
Address:						Zip:		
Home Phone:	Work Phone	:	Ema	ail (optiona	ıl):			
To Sign the form, please click the but	tton in the toolbar	above.						
Do NOT fill out this section. This is for so	chool use only.							
Status: F□ R: □ N: □								
Reason for ineligibility:								
Determining Official's Signature:				Date:				

Date:_

New Jersey Department of Education

Household Information Survey

This survey is used to determine eligibility for state benefits for which your child(ren)'s school may qualify. Please complete, sign, and return this form to your child's school.

Part A: Who should I include in "Household"?

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 (they do not share income with you/your children and they pay a share of the expenses), do not include them.

Part B: What are benefits received?

- TANF: NJ's Temporary Assistance for Needy Families (WorkFirst NJ)
- **SNAP**: Supplemental Nutrition Assistance Program (formerly food stamps)
- FDPIR: Food Distribution Program on Indian Reservations

Part C: What is included in "Annual Household Income"?

Annual Household Income includes 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 total amount everyone in your household receives from these sources. Do *not* include SNAP or FDPIR payments.
- Pensions, Retirement, Social Security, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), and disability benefits: Include the amount everyone in your household receives from these sources.
- All Other Income: Include for everyone in the household: worker's compensation, unemployment or strike
 benefits, rental income, interest and dividends, regular contributions received from who do not live in your
 household, and any other income received. Do not include income from WIC, federal education benefits and foster
 payments received by your household.
- Military Housing Allowances and Combat Pay: Include off-base housing allowances, and food or clothing allowances. Do not include Military Privatized Housing Initiative or combat pay.
- Overtime Pay: Include overtime pay ONLY if it is received on a regular basis.

How do I calculate total household income received from multiple sources and/or on a weekly, every two weeks, twice a month, or monthly basis?

- 1) Annualize pay for each source of income based on the above definitions for every household member.
 - a. Use the table below to convert your pay to an Annual Income amount.

Frequency of payment	Annual Income Conversion Amount			
Weekly	= 52 × weekly gross (not take-home) income			
Bi-Weekly (every two weeks)	= 26 × bi-weekly gross (not take-home income)			
Twice per Month	= 24 × gross (not take-home) amount received twice per month			
Monthly	= 12 × monthly gross (not take-home) income			

- 2) Add together the annualized pay from every person in the household for the total annual household income for Part C.
- 3) If your household has 8 or fewer people, check the box that shows the range for your total income. If your household has more than 8 people, do not check a box; instead, write household size and total annual household income in the space provided.

If your income fluctuates, 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, use \$1,000/month as the basis for your annual income. If you have lost your job or had your hours or wages reduced, enter zero or your current reduced income.

Additional information about this survey is available at: http://www.nj.gov/education/finance/cep/.