

Gregg Yonemori
Principal



STATE OF HAWAII
DEPARTMENT OF EDUCATION
Chiefess Kapi'olani Elementary School
966 Kilauea Avenue
Hilo, HI 96720-4249
Phone: 974-4160 Fax: 974-4161

August 2017

Dear Parent/Guardian of Chiefess Kapi'olani Elementary School Student:

Our School is participating in the Community Eligibility Provision (CEP) pilot program that allows all students to receive one breakfast and one lunch each school day at no charge to the family. All enrolled students will receive these free meals, and we will not be administering the free/reduced meal applications that we have used in previous years. Instead, we will be collecting the Family Household Survey (see page 3) for students at our school.

The information these surveys provide is very important for our school and your child to be considered for other benefits and funding opportunities. Many state and federal programs use socioeconomic status (that is, household and income information) to determine eligibility for their programs. Although your child will receive free breakfast and lunch for the entire school year at Chiefess Kapi'olani Elementary School even if this survey is not returned, returning this form will help to ensure that your child and our school will receive benefits that support your child's education

If I have more than one child, do I need to fill out a form for each child?

- Yes, for each child attending schools participating in CEP please return a separate form. You should receive a form for each child who is attending a school that is participating in CEP.
- If other children in your household attend a school that is not participating in CEP, they will not automatically get free meals. You will need to submit a Free/Reduced Meal Application in order for them to be eligible to receive free or reduced price meals.

For a list of the schools participating in CEP and other information about the CEP pilot, visit <http://bit.ly/HawaiiCEP>.

Please complete and return the attached survey (page 3) to your child's teacher or to the school office at Chiefess Kapi'olani Elementary School. If you have any questions about the purpose of this form or how to complete it, please contact our school at 808-974-4160. Thank you for your support.

Sincerely,



Gregg Yonemori, Principal

Please refer to Page 2 for instructions/guidelines to complete this form.

SECTION A: Student Information

Last Name

First Name

Grade

Birthdate (MM/DD/YYYY)

Teacher or Room # (optional)

Student SIS ID# (10-digit)

SECTION B: Household Information

Step 1: What is your household size? _____ individuals

Refer to the guidelines on page 2.

Step 2:

In the **same row** as your household size, completely fill in the bubble below the income range that matches the total annual income of your household. Include the total annual income for all members of the household before taxes and deductions.

Example: If your household size is 4 and your total annual income is \$48,050 you would bubble in the range \$0- \$52,337.

\$0 - \$52,337



If household size is 2 ...	\$0 - \$34,540 <input type="radio"/>	\$34,541 or more <input type="radio"/>
If household size is 3 ...	\$0 - \$43,438 <input type="radio"/>	\$43,439 or more <input type="radio"/>
If household size is 4 ...	\$0 - \$52,337 <input type="radio"/>	\$52,338 or more <input type="radio"/>
If household size is 5 ...	\$0 - \$61,235 <input type="radio"/>	\$61,236 or more <input type="radio"/>
If household size is 6 ...	\$0 - \$70,134 <input type="radio"/>	\$70,135 or more <input type="radio"/>
If household size is 7 ...	\$0 - \$79,032 <input type="radio"/>	\$79,033 or more <input type="radio"/>
If household size is 8 ...	\$0 - \$87,931 <input type="radio"/>	\$87,932 or more <input type="radio"/>

If household size is **9 or more** please write in...

Total Annual Income: \$

SECTION C: Parent/Guardian Signature

Step 3: By signing below, I 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.

X

Parent/Guardian Signature

Date

Printed Name of Parent/Guardian

The information submitted on this form is a confidential educational record and is therefore protected by all relevant federal and state privacy laws that pertain to education records including, without limitation, the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended (20 U.S.C. § 1232g; 34 CFR Part 99).

Please complete and return page 3 to your child's teacher or the office at your child's school.

Who should I include in “Household Size”?

You must include yourself and all people living in your household who share income and expenses. These household members could include people who are 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 “Annual Household Income”?

Add up income for all members of the household. 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 amount each person living in your household receives from these sources.
- **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 WIC, federal education benefits and foster payments received by anyone in your household.
- **Military Housing Allowances and Combat Pay:** Include off-base housing allowances. *Do not* include Military Privatized Housing Initiative or combat pay. If the combat pay is received in addition to his/her basic pay because of his/her deployment and it wasn’t received before s/he was deployed, combat pay is not counted as income.
- **Overtime Pay:** Include overtime pay **ONLY** if you receive it on a regular basis.

How do I report income received monthly, twice a month, every two weeks, or weekly?

- Determine each source of household income based on above definitions. Households that receive income at different time intervals must multiply their income as follows:
 - If paid monthly, multiply total pay by 12
 - If paid twice per month, multiply total pay by 24
 - If paid bi-weekly (every two weeks), multiply total pay by 26
 - If paid weekly, multiply total pay by 52

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.

Completing the form

- Determine your household size and write this information in Section B on Page 3.
- Add all of the income sources for all members of the household together to determine the total annual household income.
- In the same row as your household size, fill in the bubble below the range in which your total annual household income falls.
- If your household size is 9 or more, write in the household size and total annual household income in the spaces provided.
- **Sign, date, and print your name in Section C before returning the form to the school.**