



Sunny Hollow
MONTESSORI

FOR OFFICIAL USE ONLY: Rec'd _____ P.S. _____

PUBLIC PROGRAM INCOME INFORMATION

ALL INFORMATION IS CONFIDENTIAL

**Broad Financial Information is required from all Sunny Hollow families
in order for us to apply for financial aid for families in need.**

PLEASE PRINT

Parent Name _____ Student Name _____

Section I: Third Party Financial Assistance

CHILD CARE ASSISTANCE PROGRAM (CCAP)

My family CURRENTLY RECEIVES funds from CCAP. YES NO

If yes, please provide SHM with documentation.

My family IS ON THE WAITING LIST to receive funds from the CCAP. YES NO

If yes, please provide SHM with documentation.

PARENT AWARE SCHOLARSHIP RECIPIENT PARENT AWARE SCHOLARSHIP WAIT LIST

Section 2: Income Eligibility

- 1.) Please enter the number of people in your household here _____ (include all adults & all dependents)
- 2.) Using Chart A below, please determine if your Total Household Gross Income* ("THGI") is more or less than the number corresponding to your household size and indicate below in step 3.
- 3.) Please check the following box for Chart A: THGI is: MORE SAME OR LESS
- 4.) If you checked MORE for step 3, please sign the form at the bottom to complete it.
- 5.) If you checked the same or less box for step 3, please move on to Chart B and determine if your THGI is more or less than the number corresponding to your household size and indicate in step 6.
- 6.) Please check the following box for Chart B: THGI is: MORE SAME OR LESS

* To calculate Total Household Gross Income, do not include: foster care payments, federal education benefits, MFIP payments, combat pay, or value of assistance received from SNAP, WIC, FDPIR or Military Privatized Housing Initiative.

Chart A:

Household Size	Annual	Monthly	Weekly
1	\$22,459	\$1,872	\$432
2	\$30,451	\$2,538	\$586
3	\$38,443	\$3,204	\$740
4	\$46,435	\$3,870	\$893
5	\$54,427	\$4,536	\$1,047
6	\$62,419	\$5,202	\$1,201
7	\$70,411	\$5,868	\$1,355
8	\$78,403	\$6,534	\$1,508
Each add'l family member add:	\$7,992	\$666	\$154

Chart B:

Household Size	Annual	Monthly	Weekly
1	\$15,782	\$1,316	\$304
2	\$21,398	\$1,784	\$412
3	\$27,014	\$2,252	\$520
4	\$32,630	\$2,720	\$628
5	\$38,246	\$3,188	\$736
6	\$43,862	\$3,656	\$844
7	\$49,478	\$4,124	\$952
8	\$55,094	\$4,592	\$1,060
Each add'l family member add:	\$5,616	\$468	\$108

Please Sign this form below to verify the information is correct:

Parent/Guardian PRINTED NAME _____

Parent/Guardian SIGNATURE _____