



Court, Teresa <tlcourt@cps.edu>

Family Income Information (FIIF)

1 message

Sauganash School <cdmunns@cps.edu>

Mon, Sep 28, 2020 at 2:09 PM

Reply-To: cdmunns@cps.edu

To: tlcourt@cps.edu

Friendly Reminder: Turn In Family Income Information Form

This is a CPS mandate and we currently only have about 30%. Please use Ms. Vickie's directions below! Deadline for this is approaching...

Dear Sauganash Family,

Please complete the Mandatory CPS Family Income Information Form for 2020-2021 school year.

Only one form per family! All forms Due by Sept. 30th

The instructions below will help you fill the form out accurately. Remember to print and sign the form. At this time you can scan the form and email it to vmpecoraro@cps.edu or drop it off at the school at door #1 between 9:00am -2pm.

Families Applying:

Fill out the form completely
All family members **must** be listed in part 1
Form **must** include the address in part 6
Form **must** be signed

Families Opting Out:

Write "opt out" or "not applying" directly on the form
Part 1 and 6 **must** be filled out
Form **must** be signed

Families with SNAP/TANF number:

Fill out the form completely
All family members **must** be listed in part 1
Form **must** include the address in part 6
Form **must** be signed
This # is **not** the # on the medical card. If you do not know your case number please call your case worker.

Part 7

On the reverse side is part 7. This section is optional.

CPS FAMILY INCOME INFORMATION FORM 2020-2021

Parents - Please return form to school by September 30, 2020. Schools - Please enter into ODA by October 18, 2020

School Name (Nombre de Escuela):

The purpose of this form is for CPS to obtain information about families' income to determine school funding. CPS and your school may receive additional funding based on the number of low-income families enrolled. Please complete this form and return it to the school's main office.

Part 1 - HOUSEHOLD INFORMATION (INFORMACION SOBRE EL HOGAR)
List names of all members of your household living with you. (Escriba los nombres de todas las personas que viven en su hogar.)
Includes Foster Children, CPS Students, and SNAP/TANF members.

Part 4 - List Household Members With Income (SKIP THIS if you answered any of steps 2 or 3)
Part 5 - Opt In of information about other benefits. (Otros Beneficios)
Includes income reporting table and opt-in checkboxes for instructional fees and SNAP/Meal Program.

Part 6 - Signature (Firma)
I certify that all above information is true and all income is reported. I understand that information gathered from this form will be used to calculate Federal funding eligibility for the school and that school officials may verify (check) the information as being accurate; and that if I purposely give false information, I may be prosecuted.
Includes signature lines for adult household member and parent/guardian, address, zip code, and date.

SCHOOL USE ONLY Initial Determination:
[] ELIGIBLE (FREE OR REDUCED) [] INELIGIBLE (DENIED, N/A OR ?)

Sauganash School | Sauganash School, 6040 N. Kilpatrick Ave., Chicago, IL 60646

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