

## Free Books and Lunch Application

Parents/Guardians: To apply for free books/lunch for your children, fill out this form and return it to the school office.

Student Name: \_\_\_\_\_ I.D. No.: \_\_\_\_\_ Grade: \_\_\_\_\_  
 Parent/Guardian: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Counselor: \_\_\_\_\_ Total No. in Family: \_\_\_\_\_

**List names of all household members (related and unrelated):**

Names	Check if No Income	Names	Check if No Income
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>

**Total Family Income Before Deductions:**

List in Order	Yearly	Monthly	Weekly
ADC			
Pensions			
Wages			
Other			
<b>Total</b>			
Place of Employment: _____		Phone No.: _____	

Please provide the following documents to support your request for financial aid.

- Income Tax return
- Current paycheck stubs for one entire month

If you are unable to supply the above documents, please attach a letter from each employer stating gross wages and how often they are paid.

All of the above is Family Income and must be declared. ADC does not automatically qualify your children for free books/lunch. We may request additional information to verify data supplied to us by you to approve the application. We administer verification checks on income information supplied to adhere to state guidelines.

If your gross family income exceeds the amount indicated in the family income scale (on the reverse side) and you wish to apply under special hardship conditions. Examples of hardship conditions are as follows:

- unusually high medical bills
- shelter costs in excess of 30% of your income
- special education expenses due to the mental or physical condition of a child, or disaster or casualty losses

**If you are applying under special hardship conditions, you must submit a letter explaining the hardship circumstances and attach documentation to describe the nature and dollar amount of your hardship.**

In certain cases, foster children are eligible for free books and lunch regardless of your family income.

Check here if you have foster children living with you and wish to apply for free books/lunch for them.

\$\_\_\_\_\_ state the amount provided annually to you for the care of the foster child.

I hereby certify that all of the above information is true and correct to the best of my knowledge. School officials may for cause verify information on this application. Deliberate misrepresentation of information may subject the applicant to prosecution under applicable state and federal criminal statutes.

\_\_\_\_\_  
Date Signature of Adult Family Member

**Student:** My signature indicates that I agree to return the books provided to me through this program at the end of the school year.

\_\_\_\_\_  
Date Student Signature

**Illinois Annual Income Guidelines 2022-2023**

<u>Family Size</u>	<u>Family Income</u>	<u>Free Books/Lunch</u>
1	\$17,667	
2	\$23,803	
3	\$29,939	
4	\$36,075	
5	\$42,211	
6	\$48,347	
7	\$54,483	
8	\$60,619	
Each Additional Family Member	+\$6,136	

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**For Office Use Only**

**Approved**  Free Books  Free Lunch

**Denied** for the following reason(s): \_\_\_\_\_

**Your Application for Free Books/Lunch Has Been:**

**Approved**  Free Books  Free Lunch

**DENIED** for the following reason(s): \_\_\_\_\_

\_\_\_\_\_  
Date Signature of School Official