

Central Heights ISD
Socioeconomic Information Form

CONFIDENTIAL

Central Heights ISD is required to collect and report the socioeconomic status of each student to the Texas Education Agency for purposes of the annual state accountability ratings and for federal reporting. Please note this form is not sent to TEA and the income levels indicated for your family are not reported to TEA. Only the EcoDisadvantaged status of each student as determined by the information provided is reported to TEA.

Student Name _____ Grade Level _____ DOB _____ Campus _____

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SECTION A

Do you receive Supplemental Nutrition Assistance (SNAP)? Yes No SNAP # _____

Do you receive Temporary Assistance to Needy Families (TANF)? Yes No TANF # _____

If you answered YES on either of the above, skip SECTION B and continue to the SIGNATURE section.

SECTION B (Complete only if all answers in SECTION A are NO)

Please find the number in the left column that matches your household family size (ALL children and adults), then check the box **in that same row** that agrees to your household income (Less Than, Between, or Greater Than).

Household Family Size	Less Than	Yearly Income	Between	Yearly Income	Greater Than
	(Check Box Below if Applicable)		(Check Box Below if Applicable)		(Check Box Below if Applicable)
1		16,744		23,828	
2		22,646		32,227	
3		28,548		40,626	
4		34,450		49,025	
5		40,352		57,424	
6		46,254		65,823	
7		52,156		74,222	
8		58,058		82,621	
9		63,960		91,020	
10		69,862		99,419	

Note: Yearly income includes wages, salary, welfare payments, child support, alimony, pensions, Social Security, worker's compensation, unemployment and all other sources of income (before any type of deductions).

SIGNATURE

In accordance with the provisions of the Protection of Pupil Rights Amendment (PPRA) no student shall be required, as part of any program funded in whole or in part by the U.S. Department of Education, to submit to a survey, analysis, or evaluation that reveals information concerning income (other than that required by law to determine eligibility for participation in a program or for receiving financial assistance under such program), without the prior written consent of the adult student, parent or legal guardian.

Please check one of the following two boxes as appropriate.

- I certify that all the information on this form is true and that all income is reported. I understand the school will receive federal funds and will be rated for accountability based on the information I provide.
- I choose not to provide this information. I understand that the school's disbursement of federal funds and accountability rating may be affected by my choice.

Parent/Guardian Name (Print)

Parent/Guardian Signature

Date