E-Rate Household Survey
2019-2020

Please print first and last name: _____

Your Home Address: _____ City _____ State_____ Zip _____

Phone number where you can be reached: Home: _____ Cell: _____

Please list all members of your household starting with adults, then children. Include any students attending or not attending Portage School District, students in college, and adults living in the household.

Name of household member (First and Last)	Grade, if applicable	School attending

Please circle your family size, then place a check mark next to the column appropriate to your family size and income range. If your family is on assistance, please circle one of the following:

SNAP (food stamps)   TANIF   Medicaid   SSI   Section 8   LIHEAP (energy assistance)

Other_____

Use column "A" if your yearly Income is less than

Use column "B" if yearly income is greater than "A" But less than "B"

Use column "C" if yearly income is greater than income listed below

Family Size (circle one)	A Below:		B Below:		C Above:
1	$16,237		$23,107		$23,108
2	$21,983		$31,284		$31,285
3	$27,729		$39,461		$39,462
4	$33,475		$47,638		$47,639
5	$39,221		$55,815		$55,816
6	$44,967		$63,992		$63,993
7	$50,713		$72,169		$72,170
8	$56,459		$80,346		$80,347

For example: If you are a family of 3 making $36,120 per year circle 3 and check Column B.

Certification: I certify that the above information is, to the best of my knowledge, true and complete.

Sign: _____   Date: _____