

FAMILY INCOME INFORMATION

(To be completed by parent or guardian)

The information you provide to MMC Upward Bound on this form is required by the U.S. Department of Education for determining the applicant's eligibility for the program. Information received on income is **confidential**.

Student's Name _____

Family Size, Meal Program Status, and Housing

How many people live in your household? _____

School Meal Program for which your child participates:

_____ Free lunch program _____ Reduced lunch program _____ Full Paid lunch program

Do you live in public housing? _____ Yes _____ No

Income Tax Information from 2005 Federal Forms

Did you file last year? _____ Yes _____ No

If yes, please attach a copy of your completed income tax form that verifies the amount of TAXABLE INCOME. Or complete the information below from your most recently filed tax return. (Application is not complete without this information)

	# of Exemptions Taxable	Wages & Salaries	Adjusted Gross Income
1040 Tax Form	_____	_____	_____
	(line 6d) (line 42)	(line 7)	(line 36)
1040A Tax Form	_____	_____	_____
	(line 6d) (line 27)	(line 7)	(line 21)

Untaxed Income

If you did not file a tax return or if you receive any untaxed benefits, please list below the **monthly** amounts for all members of the family.

_____ Social Security	_____ AFDC
_____ Welfare (families first)	_____ Disability benefits
_____ Veteran's Benefits	_____ Retirement benefits
_____ Child Support	_____ Food Stamps
_____ Unemployment Compensation	Case # _____

My signature below indicates to the best of my knowledge that information provided on this form is true, complete, and accurate. I authorize the Martin Methodist College

Upward Bound staff to obtain copies of my child's academic and financial assistance records from the school he or she now attends or may attend in the future.

Signature of parent or Guardian

Social Security # of Parent

Date