

BARONA INDIAN CHARTER SCHOOL

1095 Barona Road, Lakeside, CA 92040 • (619) 443-0948 FAX: (619) 443-7280

BaronaIndianCharterSchool.com

October 30, 2020

Hello BICS Families,

A major source of support for our school comes from providing information to the State of California, ensuring our students receive the support, resources, and assistance they need to be successful at BICS. It is extremely important that we provide the state with the correct information in a timely manner. Please complete the information on the **back of this sheet**. The confidential information you provide will be treated with respect.

Please return the completed information sheet by November 5, 2020.

Local Control Funding Formula Collection Data

The method of funding education for the students in California has been dramatically changed under the California Local Control Funding Formula (LCFF). To ensure that Barona Indian Charter School receives the maximum funding available, we are required to collect the data on the back side of this form. The ultimate goal is to recover all of the large reductions in school funding which have occurred since the Great Recession.

To assist BICS in obtaining maximum funding for our students, please complete this form and return it to your child's teacher or to the school office by **Friday**, **November 5**, **2020**.

The information you provide on the **back of this form** will be kept in strict confidence and will **ONLY** be used for the purpose of determining the level of state funding the school is entitled to receive under the LCFF. A copy of this form and more information can be downloaded from our website.

Sincerely,

Dr. Jeffrey Felix Interim Principal

Household In	come Da	ta Collection -	- Barona Indian C	Charte	r School (Rev.7/	15)	
Household Las	t Name:						
Phone: E-mail:							
PART I: Fill in the following information for children living in your household							
Name of Child(ren) att		ending a California K-12 Public Sc Middle First		chool	School Attending	Birth Date	Grade Level
1.		Mildule	FIISL		Attending	Date	Level
2.							
3.							
P	ART II: Fil	I in the followi	ng for Household	Size a	nd Household	Income	
			e appropriate box if your category 2. Do				
For help in de instructions or			size and total annua	l house	hold income, pl	ease see	
Household Size	Total	Category 1 – Annual Household Income is Within This Range:		Category 2 – Total Annual Household Income is Within This Range:			
1							
2							
3							
4							
5							
6							
7							
8							
If household size is greater than 8, list household size and total annual income below:							
Household Size: Total Annual Income: \$							
If your total a	nnual hous	sehold income	exceeds the ranges	above	, check here:		
			DARTIII O'				
understand th	at the sch		PART III: Signatu provided on this form e state and federal in ect to review.	n is tru			
Signature of adult household member Date completing this form				Printed name of adult household member completing this form			

The information submitted on this form is a confidential educational record and is therefore protected by all relevant federal and state privacy laws that pertain to educational records including, without limitation, the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended (20 U.S.C. § 1232g; 34 CFR Part 99); Title 2, Division 4, Part 27, Chapter 6.5 of the California Education Code, beginning at Section 49060 et seq.; the California Information Practices Act (California Civil Code Section 1798 et seq.) and Article 1, Section 1 of the California Constitution.

Who should I include in "Household Size"?

You must include yourself and all people living in your household, related or not (for example, children, grandparents, other relatives, or friends) who share income and expenses. If you live with other people who are economically independent (for example, who do not share income with your children, and who pay a prorated share of expenses), do *not* include them.

What is included in "Annual Household Income"? Annual Household Income includes the following:

- **Gross earnings from work:** Use your gross income, not your take-home pay. Gross income is the amount earned before taxes and other deductions. This information can be found on your pay stub or if you are unsure, your supervisor can provide this information. Net income should only be reported for self-owned business, farm, or rental income.
- Welfare, Child Support, Alimony: Include the amount each person living in your household receives from these sources, including any amount received from CalWORKs.
- Pensions, Retirement, Social Security, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), and disability benefits: Include the amount each person living in your household receives from these sources.
- All Other Income: Include worker's compensation, unemployment or strike benefits, regular
 contributions from people who do not live in your household, and any other income received. Do not
 include income from CalFresh, WIC, federal education benefits and foster payments received by your
 household.
- Military Housing Allowances and Combat Pay: Include off-base housing allowances. *Do not* include Military Privatized Housing Initiative or combat pay.
- Overtime Pay: Include overtime pay ONLY if you receive it on a regular basis.

How do I report annual household income for pay received on a monthly, twice a month, every two weeks, or weekly basis?

- Determine each source of household income based on above definitions. Households that receive income at different time intervals must annualize their income as follows:
 - If paid monthly, multiply total pay by 12
 - If paid twice per month, multiply total pay by 24
 - o If paid bi-weekly (every two weeks), multiply total pay by 26
 - If paid weekly, multiply total pay by 52
- Add annualized pay together to determine the total annual household income and check the box on the other side of this form if it is within either of the ranges displayed for your household size.
- If your household size exceeds the size on the chart, list household size and total annual household income in the space provided.

If your income changes, include the wages/salary that you regularly receive. For example, if you normally make \$1,000 each month, but you missed some work last month and made \$900, put down that you made \$1,000 per month. Only include overtime pay if you receive it on a regular basis. If you have lost your job or had your hours or wages reduced, enter zero or your current reduced income.

For additional information on Household Size and Household Income, please see the Eligibility Manual for School Meals on the U.S. Department of Agriculture Guidance and Resource Web page at http://www.fns.usda.gov/cnd/guidance/default.htm.