Directions for Requesting a Fee Waiver

Families who have limited financial resources and meet the Federal Poverty Guideline requirements listed below may request a fee waiver for the online application fee.

2016 Federal Poverty Guidelines

Source: https://aspe.hhs.gov/poverty-guidelines

Persons in Family/Household	**Poverty Guideline** (gross household income less than or equal to below)
1	$11,880
2	$16,020
3	$20,160
4	$24,300
5	$28,440
6	$32,580
7	$36,730
8	$40,890
For families/households with more than 8 persons, add $4,160 for each additional person.	

To Request A Fee Waiver:

The fee waiver form MUST be submitted prior to completing the online application.

1. Complete the fee waiver form in its entirety (see page 3 of this document).
    a. A separate form **MUST** be completed for each child requesting a waiver.
    b. The information provided on all parts of the fee waiver form must be true and accurate.
2. Obtain the required 2 supporting documents to submit with your form(s).
    a. See page 2 of this document for a list of acceptable documentation.
    b. Request will not be processed unless all supporting documentation is provided.
3. Submit the fee waiver form and required documentation to the Division of Equity, Innovation and Choice. **Submit required documentation in person, by mail, or by fax to:**

    Division of Equity, Innovation and Choice
    2700 Judge Fran Jamieson Way
    Viera, FL 32940
    Fax: 321-632-1508
    Phone: 321-633-1000, extension 395

Review Process:

Once the required form and documentation is received, district staff will review the content of the form and supporting documentation to determine if the student is eligible to receive a fee waiver. Please allow 5-10 business days to complete this review process.

Approval/Denial of Fee Waiver Request:

Once your form is received and processed, district staff will notify you of the outcome via phone and/or email.

If your waiver is approved, you will be provided a unique Coupon Code to use for payment of the online application fee. **Only one coupon code is awarded per child per school year, and the code is good for one application only.**

Supporting Documentation to Attach to Fee Waiver Form

For **Part 3** of the fee waiver application, the parent/guardian shall submit written evidence of fee waiver eligibility. *A minimum of 2 supporting documents is required.*

Part 3: Eligibility Criteria	Type of Documentation to Provide
Free/Reduced Lunch Eligibility	District Will Verify Student Receives Free/Reduced Lunch; Supporting Documentation Not Required
Student is Homeless, Migrant, or Runaway	Transitional Assistance Benefit Letter/Document
Student Resides in a Foster Home or in Custody of the State	Youth in Custody Required Intake Form; School Enrollment Letter Provided by Case Worker from DCFS or Juvenile Justice Department
Student Receives Supplemental Security Income (SSI)	Verification Letter/Document from Social Security
Student Lives in Federally Subsidized Public Housing	Verification Letter/Document
Student's Family Annual Income Meets Federal Poverty Guidelines	District Will Verify Family/Household Income Based on Information Provided in Form and Supporting Documentation of Wages Earned (see below)
Student's Family Receives SNAP or TANF	Verification Letter/Document with TANF/SNAP Number
Student's Family Receives Public Assistance	Verification Letter/Document
Other	Explanation of "Other" Hardship to Student and/or Student's Family With Supporting Documentation

For **Part 5** of the fee waiver application, the parent/guardian shall submit written evidence of the household's current income. Current income is that amount of money your household receives (gross income) before deductions.

Part 5: Total Household Gross Income	Type of Documentation to Provide
Earnings, Wages, Salary for Each Job	Two (2) Dated Paycheck Stubs; Letter from Employer Stating Gross Wages Paid; Ledger Books or Last Year's Tax Return if Self-Employed
Social Security, Pensions, or Retirement	Social Security Benefit Letter; Statement of Benefits Received; Pension Award Notice
Unemployment Compensation, Disability, or Workers Compensation	Notice of Eligibility from State Employment Security Office; Check Stub; Letter from Worker's Compensation
Welfare Payments (TANF, SNAP, General Assistance)	Benefit Letter from Welfare Agency Indicating Benefits Received
Child Support/Alimony	Court Decree; Agreement; Copies of Checks Received
All Other Income	Documentation to Demonstrate Other Income Received
No Income	Explanation of How Food, Clothing, and Housing is Provided for Household and When Income is Expected

Updated 10/26/2016

Fee Waiver Form

Brevard Public Schools

Part 1: Select One Program – If approved, one coupon code is awarded per child per school year and is good for one online application only.

a. ☐ **Educational Location Option for the 2017-18 SY** **Requested School:** _____

b. ☐ **Educational Program Opportunity for the 2017-18 SY** **School:** _____ **Program:** _____

c. ☐ **It is outside all application window timelines, but I moved out-of-zone and want to remain at my current school.**
School: _____

Part 2: Student Information (Please Print Clearly)

Student's School ID Number (**REQUIRED**)	Student's Last Name	First Name	Birth Date

Street Address	City	State	Zip Code

Parent/Guardian	Phone Number	Other Phone Number

Email Address	Grade in 2016-17	School attended in 2016-17

Part 3: Eligibility Criteria: Check Appropriate Boxes – Minimum of Two

☐ Student is Eligible for Free/Reduced Lunch	*(If checked, district will verify; Docs. not required; Must complete Part 5)*
☐ Student is Homeless, Migrant, or Runaway	*(If checked, attach supporting documents; Part 5 not required)*
☐ Student Resides in a Foster Home or in Custody of the State	*(If checked, attach supporting documents; Part 5 not required)*
☐ Student Receives Supplemental Security Income (SSI)	*(If checked, attach supporting documents; Must complete Part 5)*
☐ Student Lives in Federally Subsidized Public Housing	*(If checked, attach supporting documents; Must complete Part 5)*
☐ Student's Family Annual Income Meets Fed. Poverty Guidelines	*(If checked, attach supporting documents; Must complete Part 5)*
☐ Student's Family Receives SNAP or TANF	*(If checked, attach supporting documents; Must complete Part 5)*
☐ Student's Family Receives Public Assistance	*(If checked, attach supporting documents; Must complete Part 5)*
☐ Other (attach additional pages)	*(If checked, attach supporting documents; Must complete Part 5)*

Part 4: Household Information

How Many Total Members in Household? _____ Adults? _____ Children? _____

Part 5: Total Household Gross Income (Before Deductions) *(Attach Supporting Documentation for Each Income Listed)*

Gross Income and How Often it is Received - Example:$100/monthly; $100/twice monthly; $100/every other week; $100/weekly

	Work Earnings (Before Deductions)		Welfare, Child Support, Alimony		Pensions, Retirement, Social Security		Worker Comp, Unemployment, SSI, (All Other Income)	
List Names of Family Members Earning Income	Amount	How Often?	Amount	How Often?	Amount	How Often?	Amount	How Often?
	$		$		$		$	
	$		$		$		$	
	$		$		$		$	
	$		$		$		$	
	$		$		$		$	

Part 6: Signature

I certify that all information is true and all income is reported on this application. I understand that written documentation is required and school officials may verify (check) information.

Date	Print Name of Person Submitting Form	Signature of Person Submitting Form

OFFICE USE ONLY: Verification by Brevard Public Schools

Fee Waiver Approved: _____ Fee Waiver Denied: _____ Date: _____

Coupon Code:

Total Income: $_____

Per Total # in House: _____

Meets Pov. Guidelines? _____