

APPLICATION FOR EXTRACURRICULAR SUPPORT FOR YOUTH (EASY)

Effective from July 1, 2017 through June 30, 2018

Household Size	Reduced Price Meals - 185%					Free Meals - 130%				
	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1.....	22,311	1,860	930	859	430	15,678	1,307	654	603	302
2.....	30,044	2,504	1,252	1,156	578	21,112	1,760	880	812	406
3.....	37,777	3,149	1,575	1,453	727	26,546	2,213	1,107	1,021	511
4.....	45,510	3,793	1,897	1,751	876	31,980	2,665	1,333	1,230	615
5.....	53,243	4,437	2,219	2,048	1,024	37,414	3,118	1,559	1,439	720
6.....	60,976	5,082	2,541	2,346	1,173	42,848	3,571	1,786	1,648	824
7.....	68,709	5,726	2,863	2,643	1,322	48,282	4,024	2,012	1,857	929
8.....	76,442	6,371	3,186	2,941	1,471	53,716	4,477	2,239	2,066	1,033
For each add'l family member add	7,733	645	323	298	149	5,434	453	227	209	105

- Student name you are applying for: _____ Grade: _____
- Head of household name: _____ Phone Number: _____
- Primary living address: _____
- Additional members residing in your home & their relationship to you: _____ / _____
 _____ / _____ / _____ / _____
- Alternate contact person, relationship to you & their phone number: _____

- Eligible for free or reduced lunch? Circle: YES / NO (If YES, proceed to Number 8)
- Please list income BEFORE deductions based upon how often you are paid.
 (Income will be rounded up to the whole dollar)
 Annual: _____ Monthly: _____ Twice per month: _____ Every 2 weeks: _____ Weekly: _____
 Will be divided by 1 Will be divided by 12 Will be divided by 24 Will be divided by 26 Will be divided by 52

8. Signature*: _____ Date: _____
 (* Signature above authorizes members of the EASY Committee to share information on this form with Riverbend School District for verification purposes.)

9. Return to: RBEF (EASY), 1110 3rd St., Fulton, IL 61252

FOR OFFICE USE ONLY:
 Amount approved: _____
 Amount set aside: _____
 Approved by: _____

Date Application received: _____

Denied by: _____ Reason: _____