2026-27 Alternate Household Income Form

Complete one form per household.

Return this form to: Andrea Walter, Director of Pupil Services, 333 Upper Rd. Kohler WI 53044

Section 1: Student Information

Instructions: List all students in the household, through grade 12. If any child you are listing is a foster child; homeless, migrant, or runaway; or attends Head Start, please check the appropriate box.

Student's First Name	Student's Last Name	Grade	School Child Attends	Foster	Homeless, Migrant, or Runaway	Head Start
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐

If more spaces are required for additional names, please attach on another sheet of paper.

Section 2: Household Income

Instructions: Your household size is the total number of people, including all children and adults, related and un-related, that live in a single dwelling and share income and expenses. Please mark your household size and then select the applicable yearly total household income range under the number of people in the household. Make sure to include all of the following income sources: work, welfare, child support, alimony, pensions, retirement, Social Security, SSI, VA benefits, child income and/or all other income. The amount should be before any deductions for taxes, insurance, medical expenses, child support, etc.

Household Size	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7	☐ 8
Income Range	☐ $0 up to $29,526.00	☐ $0 up to $40,034.00	☐ $0 up to $50,542.00	☐ $0 up to $61,050.00	☐ $0 up to $71,558.00	☐ $0 up to $82,066.00	☐ $0 up to $92,574.00	☐ $0 up to $103,082.00
	☐ $29,526.01 or more	☐ $40,034.01 or more	☐ $50,542.01 or more	☐ $61,050.01 or more	☐ $71,558.01 or more	☐ $82,066.01 or more	☐ $92,574.01 or more	☐ $103,082.01 or more

If your household has 9 or more people, please enter your information here:	Household Size:		Yearly Household Income:	$

Section 3: Sharing of Information for Local Programs

The information on this form may be shared with other programs that your child(ren) may qualify for only with your permission. Information will only be shared with the program if you check the box.

☐	Yes! I DO want school officials to share information from this form with
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☐	Yes! I DO want school officials to share information from this form with
☐	Yes! I DO want school officials to share information from this form with
☐	No! I DO NOT want school officials to share information from this form.

Section 4: Contact Information and Adult Signature

"I certify (promise) that all information on this form is true, and that all income is reported."

Signature		Print Name			
Street Address				Apt#	
City		State		Zip Code	
Phone Number		Email Address			

Completion of this form does not qualify your child/children for Summer EBT. To apply, visit dpi.wi.gov/school-nutrition/summerebt or scan the QR code.

DO NOT COMPLETE THIS SECTION. FOR SCHOOL USE ONLY.

Economic Status:	
Economically Disadvantaged (free/reduced)	☐
Non-Economically Disadvantaged (paid)	☐

To be completed by school or district staff member:	
I have reviewed the household income form on the reverse of this page and have concluded that it is properly and completely filled out to the best of my knowledge.	
Signature: (school or district staff)	
Print Name:	
Date:	

Instructions for School or District Staff:

- All cost associated with distributing, collecting, and reviewing these household income forms must be paid for with funds outside of the nonprofit school food service account.
- Parental Approval is required to share any student eligibility information needed for local programs (such as fee waivers, backpack programs, etc.). The sharing of information section provides an opportunity for parents to provide that approval in the same form. All local programs that student level information is needed for must be listed in Section 3 **by the school or district**, so parents can opt into or out of them individually. Add more lines if necessary. Parental consent is not required for State reporting requirements, such as Title 1 or Parental Choice reporting.
- For any schools/districts utilizing this form and DO NOT participate in the USDA Child Nutrition Programs, please modify the instructions in the first section and remove all language regarding the Community Eligibility Provision.
- For schools not participating in the Community Eligibility Provision (CEP) or National School Lunch Program (NSLP) using the alternate household income form for WISE data reporting should report a student identified as economically disadvantaged on this form as "True" for Economically Disadvantaged Status and "Unknown" for Food Service Eligibility.