

# NICSTO ELIGIBILITY APPLICATION

**2018**

(Northwest Iowa Christian Schools Tuition Organization)

|   |   |   |
|---|---|---|
| <p style="text-align: center;"><b>Last Name</b></p> <input style="width: 100%; height: 25px;" type="text"/>   | <p style="text-align: center;"><b>First Name</b></p> <input style="width: 100%; height: 25px;" type="text"/>  | <p style="text-align: center;"><b>Annual Income *</b></p> <input style="width: 100%; height: 25px;" type="text"/> |
| <p style="text-align: center;"><b>Address</b></p> <input style="width: 100%; height: 25px;" type="text"/>     | <p style="text-align: center;"><b>Spouse</b></p> <input style="width: 100%; height: 25px;" type="text"/>  | <p style="text-align: center;"><b>Annual Income *</b></p> <input style="width: 100%; height: 25px;" type="text"/> |
| <p style="text-align: center;"><b>City, State</b></p> <input style="width: 100%; height: 25px;" type="text"/> | <p>* Annual total income from your most recent tax forms.<br/>                     if you use Form 1040 line 22<br/>                     if you use Form 1040A line 15<br/>                     if you use Form 1040EZ line 4</p> <p>* <u>A copy of page 1 of the previous year's tax form must accompany this application.</u></p> |   |
| <p style="text-align: center;"><b>Zip</b></p> <input style="width: 100%; height: 25px;" type="text"/>         |   |   |

| List Children Living in Household | Age | School | Grade | Annual Income |
|-----------------------------------|-----|--------|-------|---------------|
| 1.                                |     |        |       |               |
| 2.                                |     |        |       |               |
| 3.                                |     |        |       |               |
| 4.                                |     |        |       |               |
| 5.                                |     |        |       |               |
| 6.                                |     |        |       |               |

**TOTAL FAMILY INCOME**

**Eligibility Guidelines are printed on the back side of the application.**

**Please explain the circumstances that may be helpful for the committee.**

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**Certification and Signature:** I certify (promise) that all information on this application is true and that all income is reported. I understand that I will be receiving tuition assistance based on the information provided. **I understand that NICSTO or school may verify or check the information provided.** I understand that if I purposely give false information I will not receive tuition aid and will not be eligible to reapply.

|                                    |                                       |      |
|------------------------------------|---------------------------------------|------|
| Signature of Adult Completing Form | Printed Name of Adult Completing Form | Date |
| Phone Number                       | Social Security Number (Required)     |      |

**For Administrative Use:**

Application Approved:

Application Denied:

Date: \_\_\_\_\_

Reason Denied: \_\_\_\_\_

| Use this Graph<br>to determine your<br>Eligibility | No. In<br>Family | Federal Poverty<br>Income Guidelines |  | NICSTO<br>GUIDELINES<br>Household Income |
|--|------------------|--------------------------------------|--|--|
|  | 1                | \$12,140                             |  | \$36,420                                 |
|  | 2                | \$16,460                             |  | \$49,380                                 |
|  | 3                | \$20,780                             |  | \$62,340                                 |
|  | 4                | \$25,100                             |  | \$75,300                                 |
|  | 5                | \$29,420                             |  | \$88,260                                 |
|  | 6                | \$33,740                             |  | \$101,220                                |
|  | 7                | \$38,060                             |  | \$114,180                                |
|  | 8                | \$42,380                             |  | \$127,140                                |
| For each additional member                         |                  | \$4,320                              |  | \$12,960                                 |

Federal Register Poverty Guidelines Jan 17, 2018