| Last Name Spouse Annual Income * | | NICSTO ELIGII | BILITY | Y APPLICATION | | 2024 | | | |
|--|---|--|-----------------------------|--|----------------------------------|-------------------------|-------------|--|--|
| Address Address Adjusted Gross Income from your most recent tax form A copy of the page which contains Adjusted Gross Income, must accompany this application. Zip 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. 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 I will not receive tuition aid and will not be eligible to reapply. Signature of Adult Completing Form Date Phone Number Social Security Number (Required) For Administrative Use: Application Approved: Date: | (Northwest Iowa Christian Schools Tuition Organization) | | | | | | | | |
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| For Administrative Use: Application Approved: Date: | | Signature of Adult Completing Form | | Printed Name of Adult Com | pleting F | -orm | Date | | |
| For Administrative Use: Application Approved: Date: | | | _ | | | _ | | | |
| Application Approved: Date: | | Phone Number | | Social Security Number (Re | equired) | | | | |
| | | For Administrative Use: | | - | | | | | |
| Application Denied: Reason Denied: | | Application Approved: | Application Approved: Date: | | | | | | |
| | | Application Denied: | | Reason Denied: | | | | | |

| Use this Graph | No. In | Federal Poverty | NICSTO GUIDELINES | |
|----------------------------|--------|-------------------|----------------------|--|
| to determine your | Family | Income Guidelines | Household Income | |
| Eligibility | 2 | \$20,440 | \$81,760 | |
| | 3 | \$25,820 | \$103,280 | |
| | 4 | \$31,200 | \$124,800 | |
| | 5 | \$36,580 | \$146,320 | |
| | 6 | \$41,960 | \$167,840 | |
| | 7 | \$47,340 | \$189,360 | |
| | 8 | \$52,720 | \$210,880 | |
| For each additional member | | \$5,380 | \$21,520 | |

Federal Register Poverty Guidelines Jan 12, 2024

Updated 1/12/2024