



DONNA INDEPENDENT SCHOOL DISTRICT
116 N. 10th Street/Donna, TX 78537/Phone (956) 464-1600

INCOME SURVEY FORM SCHOOL YEAR 2022-2023
(One Form per Student)

Student's Name: _____ Date of Birth: _____ Grade: _____

Parent's Name: _____

Address: _____

Phone Number: _____

1. Do you receive any public assistance (food stamps, TANF/AFDC)? _____

If the answer is "YES," what is your Food Stamp or TANF/AFDC case #? _____

2. If the answer is "NO," how many members in the household? _____

3. What is your combined annual income? _____

4. What is HOUSEHOLD size? (*# of people living in the home*) _____

Signature of Adult Household Member, Parent or Guardian

Date

Signature of School Representative

Campus/Position

For Local Purposes Only

Circle One 9=Economically Disadvantaged 0=Not Eligible/No proof of income

Please fill in the Local Student ID Number Local Student ID Number: _____

Administrator's Signature

Date

Date entered in TEAMS