

CACFP Income Eligibility & Enrollment Form Attachment – Additional Children & Household Members

This form is **only** to be utilized when more than three (3) children are enrolled and attend your home childcare program OR there are additional household members in the home. This form **must be attached to NS-300-H or NS-301-H**. Please do not duplicate names of children listed on Part 1 of the Income Eligibility Form or duplicate the names of household members listed in Part 4.

Complete this section for any children enrolled in the center **not listed** on Part 1 of NS-301-H or NS-301-H.

Child's Last Name, First Name	Date of Birth M/D/Y	Date Enrolled M/D/Y

OPTIONAL: Please check the ethnicity and race of the child(ren) you are enrolling.

Ethnicity (select one or more): Hispanic or Latino Not Hispanic or Latino

Race (select one or more): American Indian or Alaskan Native Asian Black or African American
 Native Hawaiian or other Pacific Islander White or Caucasian

Complete this section for any household member **not listed** on **Part 4** of *NS-300-H* or *NS 301-H*.

Name of all household members not listed above or in Part 4 of the attached form.	GROSS INCOME BEFORE ANY DEDUCTIONS (Net for Self Employed)								Check if Zero income
	<i>Frequency of pay:</i> W=Weekly E2=Every 2 weeks 2M=Twice monthly M=Monthly Y=Yearly								
Last Name, First Name	Employment Earnings <small>How much? / Frequency?</small>	Welfare, Child Support, Alimony <small>How much? / Frequency?</small>	Pensions, Retirement, Social Security <small>How much? / Frequency?</small>	All other incomes <small>How much? /Frequency?</small>					
									<input type="checkbox"/>
									<input type="checkbox"/>
									<input type="checkbox"/>
									<input type="checkbox"/>
									<input type="checkbox"/>

INSTRUCTIONS TO Family Day Care Home Sponsors: Attach this page to NS-300-H or NS-301-H for this household. Include enrolled children and all household members when making income eligibility determinations.