

Applicant's Name	
If application is for <u>yourself</u> : I am a member of the	tribe.
If application is for an infant or child: This child is a member of the	tribe.
Our household income before taking out taxes is: \$	
☐ Annual ☐ Monthly ☐ Twice-monthly ☐ Bi-weekly	☐ Weekly

ALASKA INCOME ELIGIBIITLITY GUIDELINES

(Effective from July 1, 2023 to June 30, 2024)

Please circle your household size.

If you are pregnant, add one to household size.

Household	Annual	Monthly	Twice	Bi-weekly	Weekly
Size			Monthly		
1	\$33,689	\$2,808	\$1,404	\$1,296	\$648
2	\$45,584	\$3,799	\$1,900	\$1,754	\$877
3	\$57,480	\$4,790	\$2,395	\$2,211	\$1,106
4	\$69,375	\$5,782	\$2,891	\$2,669	\$1,335
5	\$81,271	\$6,773	\$3,387	\$3,126	\$1,563
6	\$93,166	\$7,764	\$3,882	\$3,584	\$1,792
7	\$105,062	\$8,756	\$4,378	\$4,041	\$2,021
8	\$116,957	\$9 <i>,</i> 747	\$4,874	\$4,499	\$2,250
9	\$128,853	\$10,738	\$5,369	\$4,956	\$2,478
10	\$140,748	\$11,729	\$5,865	\$5,414	\$2,707
11	\$152,644	\$12,721	\$6,361	\$5,871	\$2,936
12	\$164,539	\$13,712	\$6,856	\$6,329	\$3,165
13	\$176,435	\$14,703	\$7,352	\$6,786	\$3,393
14	\$188,330	\$15,695	\$7,848	\$7,244	\$3,622
15	\$200,226	\$16,686	\$8,343	\$7,701	\$3,851
16	\$212,121	\$17,677	\$8,839	\$8,159	\$4,080
Each add'l family member add	+ \$11,896	+ \$992	+ \$496	+ \$458	+\$ 229

I certify that the family income does not exceed the maximum income for family size as shown in the table above:

igned:	Doto.
18U6O:	Date:

This institution is an equal opportunity provider.