

# Lutz Preparatory Hardship Form

Please complete the following form if your family is in need of assistance with the cost(s) of typical school

Uniforms ☐ Athletics ☐ Local One-Day Field Trips ☐ Consumables ☐  
Lunch ☐ All ☐

Parent Name			
Student(s) Names(s)		Grade(s)	
Address		State:	Zip:

Phone Number #1		Phone Number #2	
Email #1		Email #2	

Do you participate in free and reduced lunch? YES ☐ NO ☐

Please mark an X in **ONE** of the boxes below that most accurately represents the number of people (Family Size) in your family and your families combined income (Level ONE, TWO, THREE, or FOUR Income).

Please be aware that proof of family income such as a tax return or W2 may be required before assistance is granted.

Family Size	Level <b>ONE</b> Income	
2	\$16,020.00	
3	\$20,160.00	
4 or 4 +	\$24,300.00	

Family Size	Level <b>TWO</b> Income	
2	\$32,040.00	
3	\$40,320.00	
4 or 4 +	\$48,600.00	

Family Size	Level <b>THREE</b> Income	
2	\$48,060.00	
3	\$60,480.00	
4 or 4 +	\$72,900.00	

Family Size	Level <b>FOUR</b> Income	
2	\$64,080.00	
3	\$80,640.00	
4 or 4 +	\$97,200.00	

\*Please be aware that all requests for Hardship assistance will be reviewed by the Hardship committee. Assistance will be granted based on the level of need and amount of assistance funds available. Please attach a brief statement explaining why assistance is needed for your family, the level of assistance needed and the duration.

Signature: \_\_\_\_\_

FOR OFFICE USE ONLY		
Waiver approved for: _____	Prepared by: _____	Date: _____