Rate Reduction Application

Name_____ Email_____ Location (Site)_____
Phone_____ Names of Enrolled Children_____

Detailed Income Report

Is any child support ordered to be paid to you? _____ (enter yes or no)
If yes, how much **per month** is ordered to be paid to you? $ _____ (Report even if you are not receiving funds.)

What is your relationship to the enrolled child/children? __ Parent __ Grandparent __ Foster-Parent __ Other

Complete the lines below for each person in your household who has income from **any** source, such as wages, self-employment, Social Security, SSI, VA pension, workers compensation, child support, lump sum payments, or employment. **Income amounts must be reported as gross income, not take-home pay.**				
Name	**Employer or Income Source**	**Date this job started** MM/DD/YYYY	**Gross Income**	**How often received?** (weekly/monthly)

Please provide Evidence of Income from work or wages:

- ./ Copies of pay stubs for the previous month, or most recent four week period; **&/OR**
- ./ A letter from your employer stating the amount of your monthly gross income; **&/OR**
- ./ If self-employed, IRS 1040 tax form with schedule C or F; &/OR
- ./ Child support receipts; &/OR
- ./ Social Security; pension award letters, etc.
- ./ Letter indicating free lunch qualification (used if site has partial funding via a 21st Century Grant).

Household Members

List the first and last names, relationship to child, birth date and gender for ALL people who currently reside in the household.		
Name	**Relationship to enrolled**	**Birthdate**

Forward complete form with income documentation to Susie Youngpeter C/O Wood County ESC, 1867 N Research Drive Bowling Green, OH 43402 OR scan all documents and email as attachments to **syoungpeter@wcesc.org**

I certify that I have disclosed GROSS INCOME information, and that **all household income has been included**.

Parent Signature_____ **Date**_____

11.14.25