



FY 2020-2021

STUDENT REGISTRATION FORM

OFFICE USE ONLY - Do not write in this area

PROGRAM <input type="checkbox"/> ABE <input type="checkbox"/> Diploma <input type="checkbox"/> Citizenship <input type="checkbox"/> ESL <input type="checkbox"/> HSE <input type="checkbox"/> Span. HSE <input type="checkbox"/> Fee-Based / Adult Career Tech Ed. CAREER GOAL: <input type="text"/>	STUDENT TYPE <input type="checkbox"/> Regular Adult <input type="checkbox"/> CalWORKS ASAP ID#: <input type="text"/> <input type="checkbox"/> New to FAS <input type="checkbox"/> Returning Student	Have you ever attended adult school? <input type="checkbox"/> No <input type="checkbox"/> Yes, when and where did you attend? When: <input type="text"/> Where: <input type="text"/> Verified Identification: <input type="text"/> Office Initials: <input type="text"/>
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First Name:	Middle Name:	LAST Name:	MAIDEN Name or ALIAS
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Birthdate: Month _____ Day _____ Year _____	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-Binary
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Home Address:	Apt #	City	Zip Code
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Primary Phone #	Cell Phone #	Email Address:
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****Race / Ethnicity****

Mark One: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino	Mark One or More: <input type="checkbox"/> Asian <input type="checkbox"/> Alaskan <input type="checkbox"/> American Indian <input type="checkbox"/> Black/African American <input type="checkbox"/> Filipino <input type="checkbox"/> Hawaiian/Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Other _____
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Labor Force Status Mark One: <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Not employed & not seeking work <input type="checkbox"/> Employed: _____ <small>Employer</small> <input type="checkbox"/> Not in Labor Force	**Highest Level Completed** Mark One: <input type="checkbox"/> None <input type="checkbox"/> HS Diploma <input type="checkbox"/> GED Certificate <input type="checkbox"/> Technical Certificate <input type="checkbox"/> AA degree <input type="checkbox"/> 4 Year College <input type="checkbox"/> Graduate Studies <input type="checkbox"/> Some College No Degree <input type="checkbox"/> Other _____	**Earned Outside US** Degree Earned Outside US: <input type="checkbox"/> YES <input type="checkbox"/> NO
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Education Last grade completed: _____ Majority of Schooling Outside the US? <input type="checkbox"/> Yes <input type="checkbox"/> No	**Dependents/Children** Mark One: _____ # of Dependents _____ # of K12 Students in Family	**Country of Origin** <input type="checkbox"/> I was born in the U.S. City: _____ State: _____ <input type="checkbox"/> I was born outside the U.S. Country: _____
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Native Language/Nationality	**Medical Conditions/Medication**	
What is the first language you learned to speak? Mark One: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Arabic <input type="checkbox"/> Cambodian <input type="checkbox"/> Chinese <input type="checkbox"/> Farsi <input type="checkbox"/> French <input type="checkbox"/> Hmong <input type="checkbox"/> Indonesian <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Lao <input type="checkbox"/> Punjabi <input type="checkbox"/> Russian <input type="checkbox"/> Tagalog <input type="checkbox"/> Thai <input type="checkbox"/> Turkish <input type="checkbox"/> Urdu <input type="checkbox"/> Vietnamese <input type="checkbox"/> ASL <input type="checkbox"/> Other _____	Allergies and medical conditions: <input type="checkbox"/> NONE <input type="checkbox"/> YES: _____ Medications: <input type="checkbox"/> NONE <input type="checkbox"/> YES: _____	
Goals		
<input type="checkbox"/> Get a Job <input type="checkbox"/> Retain a Job / Get a Better Job <input type="checkbox"/> US Citizenship <input type="checkbox"/> HS Diploma / HSE <input type="checkbox"/> Enter College or Training <input type="checkbox"/> Military <input type="checkbox"/> Improve Basic Literacy Skills <input type="checkbox"/> Improve English Skills <input type="checkbox"/> Other _____		
Emergency Contact		
1. Emergency Contact Person	Phone Number	Relationship to Student
2. Emergency Contact Person	Phone Number	Relationship to Student

Student Signature

Date

Office Initials

Date

INFORMATION/PHOTO RELEASE

I (Student's name, please print) _____ give authorization and consent for the Fontana Unified School District and Fontana Adult School (FAS) and organizations or associations connected with FAS to use my name, photograph(s), video camera recordings, and interview comments for use in educational, promotional and publication purposes. I understand that these items may be distributed to individuals, groups, and the new media and published in, but not limited to, advertisements, new releases and newsletters, slide shows, video presentations and the World Wide Web.

I (Student's name, please print) _____ do not want my picture released.

Student's Signature

Date

Non-Discrimination Statement

The Governing Board desires to provide a safe school environment that allows all students equal access and opportunities in the district's academic and other educational support programs, services, and activities. The Board prohibits, at any district school or school activity, unlawful discrimination, harassment, intimidation, and bullying of any student based on the student's actual race, color, ancestry, national origin, ethnic group identification, age, religion, marital or parental status, physical or mental disability, sex, sexual orientation, gender, gender identity, or gender expression; the perception of one or more of such characteristics; or association with a person or group with one or more of these actual or perceived characteristics.

WIOA Barriers to Employment

(Please circle **Yes** or **No**.)

YES NO	<p>CULTURAL BARRIERS The participant perceives him or herself as possessing attitudes, beliefs, customs or practices that influence a way of thinking, acting or working that may serve as a hindrance to employment.</p>
YES NO	<p>DISPLACED HOMEMAKER</p> <ul style="list-style-type: none"> • Has been dependent on the income of another family member but is no longer supported by that income, or • Is the dependent spouse of a member of the Armed Forces on active duty and whose family income is significantly reduced because of a deployment, a permanent change of station, or the service-connected death or disability of the member • Is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment.
YES NO	<p>ENGLISH LEARNER The participant is a person who has limited ability in speaking, reading, writing or understanding the English language and also meets at least one of the following two conditions (a) his or her native language is a language other than English, or (b) he or she lives in a family or community environment where a language other than English is the dominant language.</p>
YES NO	<p>EX-OFFENDER (a) has been subject to any stage of the criminal justice process for committing a status offense or delinquent act, or (b) requires assistance in overcoming artificial barriers to employment resulting from a record of arrest or conviction for committing delinquent acts, such as crimes against persons, crimes against property, status offenses, or other crimes.</p>
YES NO	<p>FOSTER YOUTH Record if the participant is a person who is currently in foster care or has aged out of the foster care system.</p>
YES NO	<p>HOMELESS</p> <p>(a) Lacks a fixed, regular, and adequate nighttime residence. This includes:</p> <ol style="list-style-type: none"> (i) Sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; (ii) Living in a motel, hotel, trailer park, or campground due to a lack of alternative adequate accommodations (iii) Living in an emergency or transitional shelter (iv) Abandoned in a hospital (v) Awaiting foster care placement <p>(b) Has a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, such as a car, park, abandoned building, bus or train station, airport, or camping ground</p> <p>(c) Is a migratory child who in the preceding 36 months was required to move from one school district to another due to changes in the parent's or parent's spouse's seasonal employment in agriculture, dairy, or fishing work</p> <p>(d) Is under 18 years of age and absents himself or herself from home or place of legal residence without the permission of his or her family (i.e., runaway youth).</p>
YES NO	<p>LONG TERM UNEMPLOYED The participant has been unemployed for 27 or more consecutive weeks at program entry.</p>
YES NO	<p>LOW INCOME</p> <ul style="list-style-type: none"> • In the 6 months prior to application to the program has received, or is a member of a family that is receiving: • Assistance through the supplemental nutrition assistance program under the Food and Nutrition Act • Assistance through the temporary assistance for needy families program under part A of Title IV of the Social Security Act • Assistance through the supplemental security income program under Title XVI of the Social Security Act or state or local income-based public assistance. • Is in a family with total family income that does not exceed the higher of the poverty line or 70% of the lower living standard income level • Is a youth who receives, or is eligible to receive a free or reduced price lunch under the Richard B. Russell National School Lunch Act • Is a foster child on behalf of whom State or local government payments are made • Is an individual with a disability whose own income is the poverty line but who is a member of a family whose income does not meet this requirement • Is a homeless individual or a homeless child or youth or runaway youth or • Is a youth living in a high-poverty area.
YES NO	<p>LOW LEVEL OF LITERACY The participant is unable to read, write, and speak in English; compute and solve problems at levels of proficiency necessary to function on the job, in the family of the participant, or in society.</p>
YES NO	<p>NO TANF IN 2YRS OR LESS Record if the participant is within 2 years of exhausting lifetime eligibility under Part A of Title IV of the Social Security Act.</p>
YES NO	<p>PHYSICALLY DIASBLED A "disability" is a physical or mental impairment that substantially limits one or more of the person's major life activities.</p>
YES NO	<p>SEASONAL FARMWORKER</p> <ul style="list-style-type: none"> • The participant is a low-income individual (i) who for the 12 consecutive months out of the 24 months prior to application for the program involved, has been primarily employed in agriculture or fish farming labor that is characterized by chronic unemployment or underemployment; and (ii) faces multiple barriers to economic self-sufficiency. • A dependent of the person described above. <p>MIGRANT & SEASONAL FARMWORKER</p> <ul style="list-style-type: none"> • The participant is a seasonal farmworker and whose agricultural labor requires travel to a job site such that the farmworker is unable to return to a permanent place of residence within the same day • A dependent of the person described above.
YES NO	<p>SINGLE PARENT Record if the participant is single, separated, divorced or a widowed individual who has primary responsibility for one or more dependent children under age 18 (including single pregnant women).</p>

3. Ensure account information (i.e. username and password) is used only by the authorized student for an authorized purpose. Student shall not provide access to another individual, either deliberately or through failure to secure his/her access.
4. Student is to store information in his or her District provided storage. This storage is intended for classroom assignments and other school related materials. It should not include personal programs, files, photos, or videos.
5. Be informed that the records and/or e-mails of students that are maintained, sent, or received on any personal device that is being used for school purposes may be subject to disclosure pursuant to a subpoena or other lawful request.
6. Downloading, copying, otherwise duplicating, and/or distributing copyrighted materials (including music or videos) without the specific written permission of the copyright owner is a violation of U.S. Copyright Laws.
7. Copying the work or ideas of another person, including copying from printed sources or downloading material from the Internet, and representing it as your own without properly citing all sources.
8. Other prohibited usage of Information Systems includes:
 - a. Bypassing the District Internet filtering system.
 - b. Use of District Information Systems to encourage the use of drugs, alcohol, or tobacco, nor shall they promote unethical practices, or any activity prohibited by law.
 - c. Intentionally seeking information on, obtaining copies of, or modifying the files, data, and/or passwords belonging to other users.
 - d. Hate mail, chain letters, harassment, discriminatory remarks, profanity, obscenity, and other offensive, antisocial behaviors.
 - e. Accessing of social networks, such as, but not limited to, Facebook.
 - f. Disruptive use of systems by others.

Unacceptable Use

The following practices are prohibited:

1. Logging in for another student or user. All users must login under their own username and password.
2. Accessing, posting, submitting, publishing, or displaying harmful or inappropriate matter that is threatening, hateful, disruptive, or sexually explicit, or that could be construed as harassment or disparagement of others based on their race/ethnicity, national origin, sex, gender, sexual orientation, age, disability, religion, or political belief.
3. Bullying, harassing, intimidating, or threatening other students, staff, or other individuals (“cyberbullying”).
4. Disclosing, using, or sharing personal identification information (such as name, address, telephone number, Social Security number, or other personal information) of another student, staff member, or other person.

Consequences for Violations

Violations of the law, Board policy, or this agreement may result in revocation of a student’s access to District Information Systems and/or discipline, up to and including suspension or expulsion. In addition, violations of the law, Board policy, or this agreement may be reported to law enforcement agencies as appropriate.

Fontana Unified School District

Student Acceptable Use Agreement

Adult Education



www.fusd.net

Fontana Unified School District

Adult School Student Acceptable Use Agreement

Signature Form

Each adult student who is authorized to use District Information Systems shall sign this Acceptable Use Agreement on a yearly basis as an indication that they have read and understand the agreement.

Adult Student Agreement

I have read, understand, and will abide by the terms set forth in the above Adult School Acceptable Use Agreement. I acknowledge that there is no expectation of privacy in any use of District Information Systems and/or to access the school's computer network and the Internet. I further agree to release from liability, indemnify, and hold harmless the school, district, and district personnel against all claims, damages, and costs that may result from my student's use of District Information Systems or the failure of any technology protection measures used by the District.

Disclaimer

The District is not responsible for any damages students may suffer, including loss of data resulting from delays, non-deliveries, or service interruptions caused by student's own negligence, errors or omissions.

Student Full Name (Printed)

Student Signature

Student I.D. Number

Date _____

Fontana Unified School District

Adult School Student
Acceptable Use Agreement

The Fontana Unified School District (District) supports instruction through the use of technology to provide students with access to people and material from all over the world. The District believes that information and interaction promote educational excellence that is consistent with the goals of the District. To this end, the Board of Education encourages the responsible use of computer, telephone, and other electronic systems and resources (Information Systems) including the Internet, in support of the mission and goals of the District and its schools. The District complies with existing federal and state laws, including but not limited to, the Family Educational Rights and Privacy Act (FERPA) and the Digital Millennium Copyright Act (DMCA).

The District expects all students to use Information Systems, including the Internet, responsibly in order to avoid potential problems and liability. Efforts are taken to protect students from inappropriate materials, but it is impossible to completely protect students from material that is not consistent with District goals. The District may place reasonable restrictions on the sites, material, and/or information that students may access through the system.

The use of District Information Systems is a privilege, not a right. This privilege may be withdrawn if it is not used responsibly. Each student who is authorized to use District Information Systems shall sign this Acceptable Use Agreement (AUA) on an annual basis as an indication that they have read and understand the agreement.

Rights and Responsibilities

It is the policy of the District to maintain an environment that promotes ethical and responsible conduct of Information Systems activities by students. Accordingly, the District recognizes its legal and ethical obligation to protect the well-being of students and employees in its charge. To this end, the District retains the following rights and recognizes the following obligations:

1. To monitor usage and log network activity to determine, from time to time, whether specific uses of Information Systems are consistent with Board Policy 4040 and this AUA. Monitoring consists of the following:
 - a. Real-time monitoring of Internet, web, e-mail, and network activity and/or maintaining a log for later review.
 - b. Inbound and outbound District electronic mail for viruses and/or offensive material.
2. To provide guidelines and make reasonable efforts to train students in acceptable use policies and practices.
3. To remove user access to Information Systems for violation of District policy.
4. To prosecute criminal violators to the fullest extent of the law.

Acceptable Use

The following practices are acceptable:

1. Use District provided or personal electronic devices and the Internet to research and complete assigned classroom projects.
2. Use District provided or personal e-mail to send electronic mail to other students and staff members. The purpose of these communications should be educational. This may include collaborating with students, communicating with teachers, or submitting assignments electronically.

*This signed form will be entered into ASAP and kept one file.



Fontana Adult School

Empowering students to prepare for success in college, career, and life

10755 Oleander Avenue * Fontana * CA 92337 * (909)357-5490



Student Rights and Responsibilities

- To have a quality educational opportunity in a safe and orderly environment.
- To be informed about and adhere to school rules.
- To attend class regularly and punctually.
- To cooperate with staff.

Student Conduct

- Use of personal electronics is not permitted—they must be turned off in the classroom.
- Food and drinks are not permitted in the classroom.
- Skateboards and bicycles may not be used on campus.
- Hoods are not to be worn inside FAS buildings.
- Except for documented health reasons, sunglasses are not to be worn in classrooms.
- Clothes or remarks (verbal and written) affiliated with lewdness, drugs, sexual or racial slurs, or profanity are not permitted.
- Clothing may not be of a revealing nature.
- All students must log out when leaving the classroom—excessive breaks will not be tolerated.
- Smoking is prohibited on campus.
- Alcohol is prohibited on campus.
- Loitering is not permitted—if you are not in class, you must leave campus.
- Anyone not enrolled in the class is not permitted in the classroom.
- Students must sign an Acceptable Use of Agreement and follow classroom rules regarding appropriate use of computers.
- Any violation of California Education Code 48900 or 48915, or related penal codes, will cause a student to be dropped from Fontana Adult School. These violations include but are not limited to:
 - a. Causing or attempting to cause physical injury (fighting).
 - b. Damaging school or private property (including graffiti).
 - c. Using habitual profanity.
 - d. Disrupting school activities or defying school authority.

I have read and agree to follow Fontana Adult School rules.

Please note: Release of information will not be granted to parents of students 18 years or older unless parent's names are listed on the registration form under "Release of Information."

I UNDERSTAND THAT I MAY BE DISMISSED FOR VIOLATION OF ANY RULE LISTED ABOVE.

Students are dismissed a minimum of one semester and must apply for reinstatement.

Print Student Name

Student Signature

Date

Parent Signature (for students under 18 years and all concurrent students)

Date

Fontana Unified School District
SEXUAL HARASSMENT POLICY: STUDENTS
Grade 6 – 12 / Adult Ed.

In accordance with California Education Code Section 231.5(e) a copy of the educational institution's written policy on sexual harassment, as it pertains to students, shall be provided as part of any orientation program conducted for new students annually at the beginning of a quarter, semester, or summer school session, as applicable.

It is the policy of the Fontana Unified School District ("District") to provide a school environment that promotes learning and is free of harassment, including sexual harassment of any student by any employee, student or other person at school or at any school-related activity.

As used in this Policy, "sexual harassment" means unwelcomed sexual advances, requests for sexual favors, and other verbal, visual, or physical conduct of a sexual nature, made by someone from or in school, under any of the following conditions:

1. Submission to such conduct is made either explicitly or implicitly made a term or condition of an individual's employment, academic status, or progress.
2. Submission to, or rejection of, the conduct by the individual is used as the basis of employment or academic decisions affecting the individual.
3. The conduct has the purpose or effect of having a negative impact upon the individual's work or academic performance, or creating an intimidating, hostile, or offensive work or educational environment.
4. Submission to, or rejection of, the conduct by the individual is used as the basis for any decision affecting the individual regarding benefits and services, honor, programs, or activities available at or through the educational institution.

Any student of the District who believes that he or she has been subjected to sexual harassment, or any student who observes harassment in violation of this Policy, is urged to promptly pursue the matter and file a complaint

Administrative Procedures:

1. Dissemination of Policy. In order to ensure that all students have knowledge of this Policy and administrative procedure the administration will: (a) Include the Sexual Harassment Policy in the Board Policy Manual. (b) Provide copies of the Sexual Harassment Policy to all students. (c) Provide appropriate in service training regarding the Sexual Harassment Policy for all administrators and supervisors. (d) Review annually the Sexual Harassment Policy and administrative procedures as part of staff orientation activities.
2. Confidentiality. Every effort will be made to protect the privacy of students involved in any complaint. Complaints shall be investigated, reviewed and resolved on a need-to-know basis only. Confidentiality notwithstanding, all parties shall have a right to representation in the complaint process by the appropriate bargaining unit member, or other representative.
3. Retaliation. The District absolutely forbids retaliation against student who reports sexual harassment, or the exercise of any rights granted by the Policy.
4. Examples of Conduct which may be considered inappropriate:
 - a. Verbal or written conduct: making derogatory comments, including epithets, slurs, jokes, etc.; sexual propositions; graphic commentary about an individual's body; sexually degrading words used to describe an individual; suggestive or obscene letters, notes, or invitations; spreading sexual rumors.
 - b. Visual conduct: leering, making sexual gestures, displaying sexual suggestive objects, pictures, books, magazines, posters or cartoons.
 - c. Physical conduct: inappropriate or offensive touching or impeding one's movement; assault.

The Board of Education considers sexual harassment a major offense. Violation of this Policy will constitute just and reasonable cause for disciplinary action. Specific disciplinary action shall be related to the severity of the incident and/or the degree to which repeated incidents have occurred. Such disciplinary actions may include, but are not limited to, verbal warnings, suspension or expulsion from school, letters of reprimand, suspension with or without pay, and dismissal. In determining whether alleged conduct constitutes sexual harassment, the District will use the "reasonable victim" standard.

I have read this page. Print Student's Name: _____

5. Title IX Coordinator: For complaints involving sexual harassment the Title IX Coordinator is the Assistant Director, Child Welfare and Attendance, 9680 Citrus Avenue, Building #12, Fontana, CA 92335, telephone 357-5000, ext 7095.

6. Complaint Procedure and Resolution Procedures:

a. Step One, School Site Level:

All students who believe they have been the subject of sexual harassment are encouraged to inform the person engaging in such conduct that the conduct is offensive and must stop. If student is unwilling or unable under the circumstances to order the conduct stopped, the student is to proceed to Step Two.

b. Step Two, Inform An Appropriate Administrator, or Adult Staff Member:

As soon as possible or within six months of the alleged incident of sexual harassment, the student should:

1. Present his/her/their complaint to their school site principal. If the principal is the alleged harasser, then the student may present his or her complaint to the Assistant Director, Child Welfare and Attendance.
2. Upon receiving a sexual harassment complaint the appropriate administrator shall:
 - a. Counsel the alleged victim and outline the options available.
 - b. Obtain a factual written statement of the complaint.
 - c. Assist in follow-up investigation, interviewing the accused, witnesses, and supervisor, as appropriate, and recommending the disposition of the complaint.
 - d. Take all appropriate action to protect the student.
 - e. Instruct parties involved that the matter is confidential.
 - f. Advise the student of the right to file a formal complaint.
 - g. The parents or guardians of any complainant or alleged harasser shall be notified.
 - h. The immediate supervisor or other appropriate supervisor/administrator will review the factual information collected to determine whether the alleged conduct constitutes sexual harassment, giving consideration to the record as a whole and the totality of the circumstances, including the nature of the sexual advances and the context in which the alleged incidents occurred, and will take and/or authorize appropriate action. This Policy does not preclude an employee accused of sexual harassment from invoking his or her right to representation by an appropriate bargaining unit representative.

c. Formal Resolution Process

1. If the informal process does not resolve the complaint to the satisfaction of the alleged victim, or the victim is unwilling or unable to initiate the informal process, the following formal procedures are available:

- a. The complaint shall be reduced to writing and sent to the Superintendent or designee in a timely manner.
- b. Within 60 days from receipt of the complaint, the Superintendent will complete or cause to be completed an investigation and prepare a written decision as set forth in Board Policy 1312.4.
- c. Any and all rights which exist regarding confidentiality and/or privacy in these matters will be fully protect to the fullest extent allowed/required by law. Files that pertain to complaints shall be kept confidential and will not be made available except as allowed/required by law.
- d. No retaliation of any kind will occur because a student or employee made or participated in the investigation of a sexual harassment complaint.

I have read the above policy on Sexual Harassment. I understand my rights and obligations as a student.

Date

Student's Name (Please Print)

Adult Student/Parent Signature



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FY 2020-2021

(OFFICE USE ONLY-Do not write in this area)

Student ID #

(Please print your name)

Student Name: _____

Birthdate: Month _____ Day _____ Year _____

Check all that apply: (California CalWorks – Temporary Assistance Needy Family)

- I am receiving Women, Infants and Children/Food & Nutrition benefits. Member of CalFresh / Food Stamp.
 My child(ren) is/are on free or reduced lunch program at school. I receive Supplemental Security Income
 My child(ren) or I is/are receiving Medi-Cal/Medicaid or FDPIR benefits. Homeless/Homeless Program

Circle household size below.

Household Size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	\$ 23,107	\$ 1,926	\$ 963	\$ 889	\$ 445
2	\$ 31,284	\$ 2,607	\$ 1,304	\$ 1,204	\$ 602
3	\$ 39,461	\$ 3,289	\$ 1,645	\$ 1,518	\$ 759
4	\$ 47,638	\$ 3,970	\$ 1,985	\$ 1,833	\$ 917
5	\$ 55,815	\$ 4,652	\$ 2,326	\$ 2,147	\$1,074
6	\$ 63,992	\$ 5,333	\$ 2,667	\$ 2,462	\$ 1,231
7	\$ 72,169	\$ 6,015	\$ 3,008	\$ 2,776	\$ 1,388
8	\$ 80,346	\$ 6,969	\$ 3,348	\$ 3,091	\$1,546
For each additional family member add	\$ 8,177	\$ 682	\$ 341	\$ 315	\$ 158

Household is synonymous with family and means a group of related or unrelated individuals who are not residents of an institution or boarding house, but who are living as one economic unit sharing housing and all significant income and expenses. This scale does not apply to households that receive CalFresh (formerly Food Stamps), Kinship Guardianship Assistance Payment (Kin-Gap), Food Distribution Program on Indian Reservations (FDPIR) benefits, or children who are recipients of California Work Opportunity and Responsibility to Kids Program (CalWORKs). Those children are automatically eligible for free meal benefits.



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(OFFICE USE ONLY-Do not write in this area)

Student ID #

Did you attend school in California at any time from 2005 to the present?

Please check:

___ (NO)

___ (YES) What school?

K-12: _____

Other school: _____

(If YES, please complete the information below)

Student Name: _____

(Other name(s) used): _____

Birthdate: Month _____ Day _____ Year _____