

P A R E N T E D U C A T I O N C L A S S

F E E W A I V E R / R E D U C T I O N F O R M

(Must have a case in Multnomah County)

Today's Date _____ Case Number _____ In Mult. Co? Y / N

Last Name _____ First _____ M.I. _____

Address _____ Apt. _____

City _____ State _____ Zip _____

Phones: Home _____ Work _____

Cell _____ Message _____

Source of Income (Monthly)	Gross Income of Applicant (Before Taxes)	Gross Income of Others Living In & Contributing to Applicant's Househd
	Column A	Column B
Wages	\$ _____	\$ _____
SSI	\$ _____	\$ _____
Social Security	\$ _____	\$ _____
TANF	\$ _____	\$ _____
Food Stamps	\$ _____	\$ _____
Unemployment		
Compensation	\$ _____	\$ _____
Workers Comp.	\$ _____	\$ _____
Child or Spousal		
Support Regularly Received	\$ _____	\$ _____
Totals	\$ _____	\$ _____
Total A + B	\$ _____	
Less Day Care Expenses	\$ _____	
=	\$ _____	

Number of people in my household living on this income: _____

I attest that this is true & I hereby apply for a waiver:

(Signed) _____ (Date) _____

Agency Use:		
Client qualifies for	Waiver (\$0) _____	Reduced Fee \$ _____ Initials _____