

City of Minneapolis Employment and Training
MINNEAPOLIS WORKS INCOME GUIDELINES
Effective June 1, 2017

FAMILY SIZE	VERY LOW INCOME (annually)
1	Less than \$31,650
2	Less than \$36,200
3	Less than \$40,700
4	Less than \$45,200
5	Less than \$48,850
6	Less than \$52,450
7	Less than \$56,050
8	Less than \$59,700

ETHNICITY (select one only) Hispanic or Latino Not Hispanic or Latino

RACE

Please put a check (✓) next to the choice that you feel is most appropriate. **Please choose only one.**

- | | |
|--|---|
| 1. <input type="checkbox"/> White | 6. <input type="checkbox"/> American Indian/Alaskan Native & White |
| 2. <input type="checkbox"/> Black/African American | 7. <input type="checkbox"/> Asian & White |
| 3. <input type="checkbox"/> Asian | 8. <input type="checkbox"/> Black/African American & White |
| 4. <input type="checkbox"/> American Indian/Alaskan Native | 9. <input type="checkbox"/> American Indian/Alaskan Native & Black/African American |
| 5. <input type="checkbox"/> Native Hawaiian/Other Pacific Islander | 10. <input type="checkbox"/> Other Multi-racial |

Program Participant Name (printed)

The participant is in a family size of _____ with an annual income of \$ _____
(circle the appropriate family size and income in the above table)

The annual income of the participant was verified by:

- Cash Public Assistance # _____
 Food Stamp Recipient # _____
 Viewed most recent Federal Income Tax Return

I certify that the information on this form is accurate and complete. I authorize the City of Minneapolis or its providers to verify information provided, if necessary. **WARNING:** Section n1001 of Title 18 of U.S. Code makes it a criminal offense to make false statements or misrepresentations to any Department or Agency of the U.S. as to matters within its jurisdiction.

Participant Signature

Date

Staff Signature

Agency

Date