



Income Affidavit

Child's Name: _____ Application # (if available): _____

Child's Date of Birth: ____/____/____ School: _____

Household Size: _____

Please provide the current gross income for either one or both parents/guardians in the household. (**Gross income is the total income including work and non-work income before deductions, taxes and expenses.**)

As of _____, the current gross income for:
Today's Date

Both Parents/Guardians

OR:

One Parent/Guardian _____
Parent/Guardian Name

Is: \$ _____ Per Month

OR:

\$ _____ Per Year

I hereby certify that the statements above are true and accurate to the best of my knowledge.

Signature of Parent/Guardian

Signature Date

Please return this completed and signed form to the Denver Preschool Program at:

application@dpp.org

Fax: 303-295-1750

Denver Preschool Program
P.O. Box 40037
Denver, CO 80204

**FUNDING
QUALITY
PRESCHOOL
FOR DENVER**