Applicant Income Worksheet

Dates	Applicant	Other	Other	Other	Household Income	Family Size:
То						
То						
То						
То						
То						
То						
6-Month Totals:						X 2 =
Annual HOUSEHOLD In	come (Enter amo	ount in WIOA	Application)		

(Use back of form if more space is needed.)

*Income limits do not apply for persons that are unemployed.

Customer *not* employed, use the 2019 70% LLSIL and Poverty Guidelines: (If income is above amounts listed below, customer is still eligible as Adult and possibly DW).

Family Size							
	1	2	3	4	5	6	Each Add'l
70% LLSIL							
Annual	\$11,550	\$18,927	\$25,985	\$32,079	\$37,854	\$44,275	\$6,421
6 Months	\$5,775	\$9,464	\$12,993	\$16,040	\$18,927	\$22,138	\$3,211
100%	\$16,499	\$27,038	\$37,122	\$45,827	\$54,077	\$63,250	\$9,173
Poverty Guidelines							
Annual	\$12,490	\$16,910	\$21,330	\$25,750	\$30,170	\$34,590	\$4,420
6 Months	\$6,245	\$8,455	\$10,665	\$12,875	\$15,085	\$17,295	\$2,210

Customer employed, use the Riverside County Self-Sufficiency Standard: (If income is above amounts listed below, customer is <u>not</u> eligible <u>— exclude DW eligible with-stop-gap employment)</u>

Income	Adult	Adult + 1 Individual	Adult + 2 Individuals	Each Add'l Individual
Monthly Total	\$2,522	\$3,756	\$4,990	\$1,234
Annual Total	\$30,262	\$45,074	\$59,875	\$14,810
Hourly Self-Sufficient Wage	\$14.55	\$21.67	\$28.79	\$7.12

Calculating Method Used: ☐ Average Pay Method	☐ Straight Pay or Salary Method☐ Intermittent Work Method	Year-to-Date Method ☐ Other/Applicant Statement
Staff Signature		Date