City of Minneapolis
Income Verification / Race Identification Form

CDBG, WIA and Close the Gap INCOME GUIDELINES

Effective January 1, 2013

FAMILY SIZE	VERY LOW INCOME (annually)
1	Less than $28,850
2	Less than $32,950
3	Less than $37,050
4	Less than $41,150
5	Less than $44,450
6	Less than $47,750
7	Less than $51,050
8	Less than $54,350

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. ☐ White
2. ☐ Black/African American
3. ☐ Asian
4. ☐ American Indian/Alaskan Native
5. ☐ Native Hawaiian/Other Pacific Islander
6. ☐ American Indian/Alaskan Native & White
7. ☐ Asian & White
8. ☐ Black/African American & White
9. ☐ American Indian/Alaskan Native & Black/African American
10. ☐ Other Multi-racial

_____ _____

Name Social Security #

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

12/2012