## **ESTIMATED POVERTY LEVEL:**

The following information is gathered for organizational and funding purposes only. All information will be kept confidential and will not affect your Care Receiver eligibility status or any services provided to you by Good Shepherd Caregivers.

## INSTRUCTIONS FOR INDICATING YOUR POVERTY LEVEL STATUS:

One the table below, find the size of your family unit in the first column. Then look at the figure just to the right of your family unity size; this amount is 125% of the federal poverty level for your size family. If your household is below this amount, put a check mark in the box to the right of this amount. If your household income is above this amount, you should leave the box blank.

Size of family unit	125 Percent of Poverty	Check Box that Applies
1	\$14,363	
2	\$19,388	
3	\$24,413	
4	\$29,438	
5	\$34,463	
6	\$39,488	
7	\$44,513	
8	\$49,538	

<sup>\*\*</sup>ACCORDING TO THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES 2014 POVERTY GUIDELINES\*\*

What is your income level: Above Average→□ Average→□ Below Average→□