

PLEASE COMPLETE A FORM FOR EACH CHILD...

IMPACT AID PROGRAM SURVEY FORM
VARNUM PUBLIC SCHOOLS
2017-2018 SCHOOL YEAR

Date of Survey: August 20, 2017 – List all information as of this date! Turn in to office.

Name of Student: _____
Last First Middle

Physical Address (not mailing): _____
Street City State Zip

Birthdate: _____ Grade: _____

Do you live on federal property? If yes, then please complete below... Check Below

- A. On Restricted Indian Land Yes___ No___
B. On Indian Trust Land Yes___ No___
C. In a Seminole/Creek Tribal Housing Authority Home or Property Yes___ No___
D. On "Other" Federal Property (such as Low Rent Housing) Yes___ No___

If you live on "other" federal property, please give the name and address of the property:

Table with 2 columns: Name, Address

If you live on federal property, do you also work on Federal Property? Yes___ No___

Do you or your spouse work on federal property? If yes, please complete below...

Were any parents/guardians with whom the student lives employed at (or did they report to work at):

Table listing various federal property locations with checkboxes for employment.

If you worked on federal property not listed above, please list the name and address of the work site/employer:

If any of the items above are checked, please indicate which parent/guardian worked where:

Parent/Guardian #1 _____ Work Site _____
Parent/Guardian #2 _____ Work Site _____

Was any parent/guardian (even non-custodial parents) on active duty in the Uniformed Services (Military) on the survey date (08/20/2017)? Yes___ No___ If yes, please provide name, rank, and branch of service:

Name Rank Branch of Service

Please sign and date the form below certifying that the above information is correct:

Parent/Guardian Signature Date

I understand that typing my name constitutes a legal signature confirming that I acknowledge and agree to the above Terms of Acceptance.