**Sept. 8, 2023**

# Parent Form

School District: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Your children may be eligible to receive supplemental services, depending on the answers to this form.*

## General Information

Name of Parent(s) or Guardian(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Best time to be contacted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Have both parents lived in this town continuously for the past 3 years or longer? Yes \_\_\_\_\_\_ No \_\_\_\_\_\_

*If* **Yes***, please stop completing the form. If* **No***, please continue.*

1. Please select any of the following jobs that the family has done in the last 3 years:

\_\_\_Slaughter, processing, meat locker (beef, poultry, pork) Tyson, JBS, Monsanto, Smithfield, Seaboard

\_\_\_Feeding, milking, taking care of cows or goats (dairy farms)

\_\_\_Planting or detasseling corn, soybeans, fruits, vegetables, nurseries, or greenhouses

\_\_\_Hog farms, chicken farms, eggs, or turkey farms

\_\_\_Preparing farm fields

\_\_\_Other agricultural work. What was the activity or company? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Children’s Information

|  |  |  |
| --- | --- | --- |
| Name of Child | Name of School | Grade |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

*Please return this form to the school.*

**Attention:** School district migratory liaison, scan and email completed forms to [alex.johnson@iowa.gov](mailto:alex.johnson@iowa.gov) before filing the original copy in the student’s records. Contact Rachel Pettigrew, Migratory Education Program Consultant, with any questions regarding this form: [rachel.pettigrew@iowa.gov](mailto:rachel.pettigrew@iowa.gov) or 515-380-5115.