

MISSOURI MIGRANT EDUCATION CENTERS

Parental Survey



School District: _____

Enrollment Date: _____

If you have children that have moved from one school district to another within the past three (3) years, they may be eligible for a special program of supplemental education and health services. Please complete the following survey information, and after you finish, return it to your school office.

1. YES _____ NO _____ Have you moved to this area in the past three (3) years?

2. YES _____ NO _____ Did you move to seek or obtain some form of temporary or seasonal agricultural work such as:

If you have done any of the jobs mentioned, it could be that your children are eligible.

- Planting or harvesting crops
- Transporting farm products to market
- Feeding poultry, gathering eggs, working in a hatchery
- Processing meat, poultry, fruit, vegetables, dairy products
- Milking cows on a dairy farm
- Cutting firewood or logs to sell
- Commercial fishing or working on a fish farm

3. YES _____ NO _____ Are you or your spouse under 22 years of age?

4. YES _____ NO _____ Do you have children under 22 years of age living in your home?

5. YES _____ NO _____ Have your children changed school districts in the last three years?

6. YES _____ NO _____ Have you moved with your children during the summer to do any of the work as mentioned in item #2 above?

7. What was the date when you moved to this school district? _____

Parents or Guardians: _____

Address: _____

City: _____ State: _____

Phone #: _____

When can we find you at home? _____

Children's Names	Ages	Grades

*** Please explain briefly how to get to your house. Feel free to draw a map on the back of this page. When you complete the survey, please return it to the school. The school secretary will send it to the Migrant Education Center. We'll be communicating with you about services your children can receive if they're eligible for the program. Thank you very much!

MAIL TO: WAYNE FERGUSON
305 EAST CLEVELAND
MONETT, MO. 65708

TRANSPORTATION ENROLLMENT

(Please indicate which applies)

- No Changes From Last Year
- New Enrollment
- Change In Address
- Change Of Information

Students Name: _____ Grade: _____

Address: _____ City: _____

Parents Name: _____

Phone: _____ Emergency Phone: _____

Pick Up Address _____

Take Home Address _____

Special Instructions _____

If you do not desire transportation. Please indicate so, in special instructions.

For Transportation Only

Route: _____ Bus Number: _____

Driver: _____