Impact Aid Program Survey Form The survey date is _____

STUDENT INFORMATION

Student's Last Name	First Name		M.I.	Date of Birth	Grade	School Name	e
Address		City			State	Zip Code	
If the above property is a federal property, enter the name of the property. Name of fede		ral prope	erty				

PARENT/GUARDIAN EMPLOYMENT INFORMATION: CIVILIAN

Enter information in this section regarding the parent/guardian if 1) neither parent/guardian with whom the student resided was on active duty in the					
Uniformed Services of the United States and 2) either parent/guardian with whom the student resided was employed on federal property, or 3) either					
the parent/guardian reported to work on federal property on the survey date. Enter the parent/guardian's name as it appears on the employer's payroll					
record.					
Parent/Guardian's Last Name	First Name and M.I.	Name of Parent/Guardian's Employer			
Address of Parent/Guardian's Employer		City	State	Zip Code	
In the second				L	
Name of federal property					
Address of federal property		City	State	Zip Code	

PARENT/GUARDIAN EMPLOYMENT INFORMATION: UNIFORMED SERVICES

Enter information in this section regarding the parent/guardian if either person was on active duty in the Uniformed Services of the United States on the survey date.					
Parent/Guardian's Last Name	First Name and M.I.	Branch of Service	Rank		

PARENT/GUARDIAN EMPLOYMENT INFORMATION: FOREIGN MILITARY

Enter information in this section re-	garding the parent/guardian if either	person was both an accredited foreig	n government official and a foreign		
military officer on the survey date.					
Parent/Guardian's Last Name	First Name and M.I.	Branch of Service	Rank		
Name of Foreign Government					

PARENT/GUARDIAN EMPLOYMENT INFORMATION: FARMING, GRAZING, LUMBERING AND MINING

Enter information in this section if either the parent or guardian spent more than 50 percent of his or her working time on federal property (whether as an employee or self-employed) engaged in farming, grazing, lumbering or mining.

Parent/Guardian's Last Name	First Name and M.I.	Name of Parent's/Guardian's Employer			
Address of Parent/Guardian's Employer		City	State	Zip Code	
Name of federal property		Address of federal property			
Permit Number	Township	Range	Section		

This information is the basis for payment to your school district of federal funds under the Impact Aid Program (Title VIII of the Elementary and Secondary Education Act), and *may* be provided to the U.S. Department of Education *if* your school district's application for payment is audited. This form *must* be signed and dated for your school district to receive funds based on this information.

→ Signature of Parent/Guardian

→Date