

Impact Aid Program Survey Form 2021-22

The survey date is September 17, 2021

Return completed form to your child's school office no later than October 1, 2021

1...STUDENT INFORMATION: List each student enrolled in the Sparta Area School District below:

Home Street Address		City	State	Zip Code
Home Email Address:				
Student's Last Name	Student's First Name	Date of Birth	Grade	Student's School
Student's Last Name	Student's First Name	Date of Birth	Grade	Student's School
Student's Last Name	Student's First Name	Date of Birth	Grade	Student's School
Student's Last Name	Student's First Name	Date of Birth	Grade	Student's School
Student's Last Name	Student's First Name	Date of Birth	Grade	Student's School

2...PARENT/GUARDIAN EMPLOYMENT INFORMATION:

Enter information in this section regarding the parent/guardian if 1) neither parent/guardian with whom the student resides 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 1 Last Name:	First Name and M.I.:	Name of Employer:		
Complete Street Address of Employer:	City	State	Zip Code	
Parent/Guardian 2 Last Name:	First Name and M.I.:	Name of Employer:		
Complete Street Address of Employer:	City	State	Zip Code	

3...UNIFORMED SERVICES/ACTIVE MILITARY: PARENT/GUARDIAN EMPLOYMENT INFORMATION

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. For Reserves/National Guard, must be on active duty on the count date above and supply a copy of Article 10 orders to the district in order to be counted.			
Parent/Guardian 1 Last Name	First Name and M.I.	Branch of Service	Rank
Parent/Guardian 2 Last Name	First Name and M.I.	Branch of Service	Rank

4...FOREIGN MILITARY: PARENT/GUARDIAN EMPLOYMENT INFORMATION

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

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.

*By signing this form, I am certifying that all typed and written information on this form is accurate and complete as of the survey date.

Signature of Parent/Guardian

Date