

Beauregard Parish School Board
Federal Impact Aid Student Information
Survey Date: November 7, 2012

Please complete one survey per household and complete all sections that apply to your family. Sign, date, and return to your child's school no later than Wednesday, November 14, 2012.

STUDENT INFORMATION			
Student Name: _____	School _____	Grade _____	Birth Date (month/day/year) _____
Student Name: _____	School _____	Grade _____	Birth Date (month/day/year) _____
Student Name: _____	School _____	Grade _____	Birth Date (month/day/year) _____
Student Name: _____	School _____	Grade _____	Birth Date (month/day/year) _____
Student Name: _____	School _____	Grade _____	Birth Date (month/day/year) _____
Home Street Address: _____		City: _____	State ____ Zip _____
			If address is a listed federal property, please check one:
<input type="checkbox"/> DeRidder Housing Authority <input type="checkbox"/> Merryville Housing Authority		<input type="checkbox"/> Fort Polk <input type="checkbox"/> Other _____	

MILITARY SERVICE/ ACTIVE DUTY – PARENT/GUARDIAN	
Was either parent/guardian an ACTIVE DUTY member of the uniformed services on November 7, 2012? <input type="checkbox"/> YES <input type="checkbox"/> NO Complete information if parent/guardian is active duty in the United States uniformed services or active as of November 7, 2012. This also applies to active duty reservists, including National Guard by order of the President.	
Name: _____ <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian Rank _____ Service Branch _____	Name: _____ <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian Rank _____ Service Branch _____

EMPLOYED ON FEDERAL PROPERTY – PARENT/GUARDIAN	
Was either parent/guardian employed on federal property on November 7, 2012? <input type="checkbox"/> YES <input type="checkbox"/> NO Complete information if parent or guardian is a civilian employed on federal property as of November 7, 2012. Examples: Fort Polk, Civil Service, US Post Office, USDA Office, etc.	
Name: _____ <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian Employer Name: _____ Employer Address: _____ _____	Name: _____ <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian Employer Name: _____ Employer Address: _____ _____

PLEASE SIGN, DATE AND RETURN NO LATER THAN NOVEMBER 14, 2012:

Signature of Parent/Guardian _____ Date _____