

**Beauregard Parish School Board
Federal Impact Aid Student Information
Survey Date: October 17, 2019**

Please complete one survey per household and all applicable sections that apply to your family.
Sign, date and return to your child's school no later than December 6, 2019.

Student Name: _____	School _____	Grade _____	DOB _____
Sibling: _____	School _____	Grade _____	DOB _____
Sibling: _____	School _____	Grade _____	DOB _____
Sibling: _____	School _____	Grade _____	DOB _____
Sibling: _____	School _____	Grade _____	DOB _____

Home Address: _____ City: _____ State ____ Zip _____

If address is located on ***federally owned property***, please check one of the following:

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> DeRidder Housing Authority | <input type="checkbox"/> Fort Polk |
| <input type="checkbox"/> Merryville Housing Authority | <input type="checkbox"/> Other _____ |

Active Duty Military

Complete the following information if parent/guardian is active duty in the United States uniformed services as of October 17, 2019.

If parent/guardian is in the Army National Guard or reserves, attach a copy of their orders.

Name: _____
 Mother Father
 Guardian
 Rank _____ Branch _____
 Reserves ordered to report to active duty by Executive Order 13223 on

Name: _____
 Mother Father
 Guardian
 Rank _____ Branch _____
 Reserves ordered to report to active duty by Executive Order 13223 on

Employed on Federal Property

Complete the following information if parent/guardian is a civilian employed on federal property as of October 17, 2019.

Examples: Fort Polk, civil service, US Post Office, USDA Office, Overseas Contractor, Etc.

Name: _____
 Mother Father Guardian

Name: _____
 Mother Father Guardian

Employer: Fort Polk

Employer: Fort Polk

Other Employer: _____

Other Employer: _____

Address: _____

Address: _____

City/State: _____

City/State: _____

PLEASE SIGN, DATE AND RETURN NO LATER THAN DECEMBER 6, 2019:

Parent/Guardian Signature

Date