

Federal Impact Aid Annual Parent-Student Survey

Baltimore City Public Schools needs your assistance in order to secure additional funding from the federal government through the “Impact Aid” program. This program provides funds to school districts that have students who reside in low-income housing units or whose parents work for a federal government agency or are on active military duty.

In order to receive Impact Aid funds, City Schools must have documentation from a parent or guardian of each student enrolled in the school district to

1. Confirm the student’s place of residence, and
2. Determine if the student’s parent or guardian is employed on federal property or
3. Determine if the student’s parent or guardian is on active military duty

With your help, City Schools can secure the district’s appropriate share of federal Impact Aid funds. **Please complete and sign the survey on the reverse for each child in your household, and return it to your child’s school by September 30, 2011.** All information you provide on the survey will be handled in a confidential manner.

If you need additional information, please call **City Schools’ Office of Grants Administration** at 410-396-8939.

Thank you for your help and support.

Federal Impact Aid Annual Parent-Student Survey

Directions: Please complete sections A, B and D; if a parent/guardian is on active military duty, also complete section C. If you have more than one City Schools student in your household, complete a separate survey for each child. Completed surveys should be returned to each child's school by **September 30, 2011**.

All information submitted will be handled in a confidential manner.

A. STUDENT INFORMATION (please print)

Student name: _____
First name Middle initial Last name

Address: _____
Street City State Zip

Date: _____ School: _____ Grade: _____ Date of Birth: _____

B. PARENT/GUARDIAN WORK INFORMATION (please print)

Note: This section applies only to the parent(s)/guardian(s) with whom the student resides.

Check any of the following that apply to you as parent(s)/guardian(s) of the student named in section A.

- I/we live on federal property (e.g., in government-owned subsidized housing)
- I/we work on property owned by the federal government.
- I/we do not work on property owned by the federal government.
- I/we do not know if the property on which I/we work is owned by the federal government.

Parent or guardian's name Employer Work address Work phone

Parent or guardian's name Employer Work address Work phone

C. PARENT/GUARDIAN MILITARY SERVICE INFORMATION (please print)

Note: This section does not apply to the National Guard or the Reserves, unless the parent/guardian is on active duty.

Name of parent/guardian on active duty: _____ Rank: _____

Name of parent/guardian on active duty: _____ Rank: _____

Please check type of service:

- U.S. Military
- Foreign Military
- Retired Military

Please check the branch of service:

- Air Force
- Army
- National Guard
- Commissioned Officer:
Public Health Service
- Marine Corps
- Coast Guard
- Navy
- NOAA Corps

D. PARENT/GUARDIAN Signature

Signature Telephone number E-mail address Date