

**\*Confidential\***

**Military Children in Education**

**2018-19 School Year**

Purpose: This questionnaire is the result of a Department of Defense (DOD) program supported by Indiana statute 20-19-3-9.4. Confidentially identifying military children and providing data on their attendance and educational outcomes, states can assist schools and districts by providing access to data to help inform policy and program decisions for this unique student population. In addition, DOD will benefit from this data in developing policy for military child education initiatives.

School Name: \_\_\_\_\_ Student's Grade Level: \_\_\_\_\_

Student's Full Legal Name: \_\_\_\_\_

Please print clearly

Please complete the questions that best describes your student's situation. It is possible to answer "yes" to both.

1. Is the above named student connected to an Active Duty military family: \_\_\_\_\_ Yes \_\_\_\_\_ No

Meaning a school-aged child, enrolled or in the process of enrolling in KG-12<sup>th</sup> grade, is claimed as a dependent by an Active Duty member of the Armed Forces of the United States; or the student and an Active Duty member(s) are of the same household whether or not the active duty member(s) claims the student as a dependent.

"Active Duty" means: full-time duty status in the active uniformed service of the United States.

2. Is the above named student connected to a Guard or Reserve military family: \_\_\_\_\_ Yes \_\_\_\_\_ No

Meaning a school-aged child, enrolled or in the process of enrolling in KG-12<sup>th</sup> grade, who is claimed as a dependent by a member of the National Guard or Reserve; or the student and National Guard or Reserve member(s) are of the same household whether or not the National Guard or Reserve member(s) claims the student as a dependent.

"National Guard or Reserve" means: members of the Reserve Component as defined in 10 U.S.C. Section 10101. Includes Army National Guard of US, Army Reserve, Navy Reserve, Marine Corps Reserve, Air National Guard of US, Air Force Reserve or Coast Guard Reserve.

**ONLY For Students of an ADULT High School (IC 20-24-1-2.3)**

Is the above named student an active member of the Armed Forces of the United States \_\_\_\_\_ Yes \_\_\_\_\_ No

OR

Is the above named student a member of the National Guard or Reserve \_\_\_\_\_ Yes \_\_\_\_\_ No

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***This form shall be handled by schools in a confidential manner in accordance with IDOE Guidance (IC 20-19-3-9.4)***

**Knox Community School Corporation McKinney-Vento Residency Form**

**Student Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **Grade Level** \_\_\_\_\_

The McKinney-Vento Homeless Assistance Act defines "homeless" as "individuals who lack a fixed, regular, and adequate nighttime residence." This includes children who "are temporarily sharing the housing of other persons due to the loss of housing or economic hardship."

**Please check only one of the following statements:**

- 1. Does not apply; student is not homeless
  
- 2. Living in a shelter, including transitional housing shelters. Please provide name of shelter and address \_\_\_\_\_
  
- 3. Living on the streets, abandoned buildings, in cars, trailers, campgrounds, public places, housing not fit for habitation--Please provide information regarding area in which student is living:  
\_\_\_\_\_
  
- 4. Living in hotels/motels for lack of other suitable housing – Please list name and address of hotel/motel: \_\_\_\_\_
  
- 5. Doubled-up; temporarily living with family or friends due to lack of adequate housing or financial conditions. Please provide address of where student is living:  
Address: \_\_\_\_\_

**Please answer the following if you checked Number 2, 3, 4, or 5 above:**

How long do you expect to be at this address? \_\_\_\_\_

Are you seeking permanent housing? \_\_\_\_\_ Date student moved to this address: \_\_\_\_\_

Is a parent living in the home with the student? \_\_\_\_\_

If no, with whom is student living? \_\_\_\_\_ Relationship: \_\_\_\_\_

A McKinney-Vento Liaison representing the district may be in contact with you for clarification or for bus transportation.

**We have read the information provided & indicated our living circumstances above specific to the McKinney-Vento Act:**

\_\_\_\_\_  
Parent/Guardian/Unaccompanied Youth Signature \_\_\_\_\_  
Date

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Office Use Only:            Does Qualify under McKinney-Vento Act            Does NOT Qualify

\_\_\_\_\_  
McKinney-Vento Liaison/Appointee Signature \_\_\_\_\_  
Date

The Migrant Education Program (MEP) provides supplemental education and support services to eligible children through national funding. The purpose of the program is to ensure that all migrant students reach the academic standards and graduate with a high school diploma (or complete GED/HSE).

**WORK SURVEY**


Thank you for answering the following questions. If your child is eligible for the Migrant Education Program, they may receive additional educational support. This information is **strictly confidential**.

Student's Name: \_\_\_\_\_ Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Date: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

1. Within the last **3 years**, have your children moved for any reason? **YES** \_\_\_\_ **NO** \_\_\_\_
2. Has anyone in your household moved from one school district to another within the United States, to look for seasonal or temporary work in agriculture? **YES** \_\_\_\_ **NO** \_\_\_\_

If you answered **NO** to either of these questions, please stop. 

If you answered **YES**, please continue.

3. When was the last time you or anyone in your household has moved to look for, or work in an agricultural activity within the United States? Month \_\_\_\_\_ Year \_\_\_\_\_

4. Please check any of the agricultural activities listed below that you have looked for or worked in:

- |   |   |
|---|---|
| <input type="checkbox"/> Plant or harvest vegetables or fruits                | <input type="checkbox"/> Canning vegetables or fruits       |
| <input type="checkbox"/> Detassel corn  | <input type="checkbox"/> Sod farm                           |
| <input type="checkbox"/> Tobacco farm   | <input type="checkbox"/> Planting, pruning or cutting trees |
| <input type="checkbox"/> Poultry and/or egg farm                              | <input type="checkbox"/> Dairy farm                         |
| <input type="checkbox"/> Duck, turkey, chicken, pork or beef processing plant | <input type="checkbox"/> Flora culture/gladiola farm        |
| <input type="checkbox"/> Aquaculture/fish hatcheries                          | <input type="checkbox"/> Green house or plant nursery       |

Please list the names of all of the children in the household under 22 years of age.

Child's Name	Date of Birth (D.O.B.)
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

**El Programa de Educación Migrante (MEP) provee servicios educativos suplementarios a niños que califican a través de fondos nacionales. El propósito del MEP es asegurar que todos los estudiantes migrantes tengan éxito académico y que se gradúen con su diploma (o que completen el GED/HSE).**

**ENCUESTA DE TRABAJO**


Gracias por contestar las siguientes preguntas. Si su hijo/a es elegible para el Programa de Educación Migrante, podría recibir apoyo educativo adicional. La información es **completamente confidencial**.

Nombre del Estudiante: \_\_\_\_\_ Nombres de los Padres: \_\_\_\_\_

Dirección: \_\_\_\_\_ Ciudad: \_\_\_\_\_ Teléfono: (\_\_\_\_) \_\_\_\_\_

Fecha: \_\_\_\_\_ Firma de los Padres: \_\_\_\_\_

1. ¿Durante los **últimos 3 años**, se ha mudado su(s) hijo(s) por cualquier razón? **SÍ** \_\_\_\_\_ **NO** \_\_\_\_\_
2. ¿Se ha mudado alguien de su familia dentro de los Estados Unidos para buscar trabajo temporal o de temporada en algo relacionado con la agricultura? **SÍ** \_\_\_\_\_ **NO** \_\_\_\_\_

Si contestó **NO** a cualquiera de las dos preguntas, favor de parar aquí. 

Si contestó **SÍ**, favor de continuar.

3. ¿Cuándo fue la última vez que usted o un miembro de su familia se mudó para trabajar en la agricultura? Mes \_\_\_\_\_ Año \_\_\_\_\_

4. Por favor marque en la parte abajo la actividad agrícola en que usted buscó trabajo o trabajó.

- |   |  |
|---|--|
| <input type="checkbox"/> Matadero de patos, pavos, pollos, cerdos o vacas | <input type="checkbox"/> Enlatar o congelar verduras o frutas en la bodega |
| <input type="checkbox"/> La espiga (maíz)                                 | <input type="checkbox"/> Trabajar en la siembra o cosecha de césped        |
| <input type="checkbox"/> Cultivar tabaco                                  | <input type="checkbox"/> Plantar, emparejar o cortar árboles               |
| <input type="checkbox"/> Pollería o granja de huevos                      | <input type="checkbox"/> Granja de vacas lecheras                          |
| <input type="checkbox"/> Plantar o cosechar verduras o frutas             | <input type="checkbox"/> Cultivar y cosechar flores                        |
| <input type="checkbox"/> Trabajar en un criadero de peces                 | <input type="checkbox"/> Trabajar en la cría de plantas                    |

Por favor escribe los nombres de todos los niños, menores de 22 años de edad, que viven con Usted.

Nombre del niño(a)	Fecha de nacimiento
1.	
2.	
3.	
4.	
5.	

**This form is to be returned to the KHS office by**

**Friday, August 10, 2018**

***The KHS STUDENT HANDBOOK is found on the KHS website and was sent to your student in PDF/email format.***

***Hardcopies are available in the Student Services office.***

Please complete the form below and return it to the school in person, with the student, or by mail. Your cooperation is most appreciated.

- I give permission for the use of student pictures in and/or release of names to the school yearbook, school paper, school website, in-house television monitors, local newspapers, and school news releases, etc.; for awards and outstanding achievement.
- I (we) have read the Knox High School Student Handbook and have reviewed the disciplinary policies, as well as other information contained in the handbook. By signing this document I (we) hereby agree to abide by its terms, as well as to follow rules pertaining to proper usage of educational technology and equipment at Knox High School.
- I give consent for my child to participate in school field trips and the student agrees to abide by rules established by the educators who conduct such trips.
- As the parent/guardian of this student, I have read the Student Network and Internet Acceptable Use and Safety Policy and Guidelines, and have discussed them with my child. I understand that the student access to the internet is designed for educational purposes and that the Corporation has taken available precautions to restrict and/or control student access to material of the internet that is obscene, objectionable, inappropriate and/or harmful to minors. However, I recognize that it is impossible for the Corporation to restrict access to all objectionable and/or controversial materials that may be found on the internet. I will not hold the Corporation (or any of its employees, administrators, or officers) responsible for materials my child may acquire or come in contact with while on the internet. Additionally, I accept responsibility for communicating to my child guidance concerning his/her acceptable use of the internet – i.e., setting and conveying standards for my daughter/son to follow when selecting, sharing and exploring information and resources on the Internet. I further understand that individuals and families may be liable for violations.
- As the student, I have read and agree to abide by the Student Network and Internet Acceptable Use and Safety Policy and Guidelines. I understand that any violation of the terms and conditions set forth in the Policy and Guidelines is inappropriate and may constitute a criminal offense. As a user of the Corporation's computers/network and the internet, I agree to communication over the internet and the network in an appropriate manner, honoring all relevant laws, restrictions and guidelines.
- To the extent that proprietary rights in the design of a web site hosted on the Corporation's servers would vest in my child upon creation, I agree to assign those rights to the Corporation.
- I give permission for my child to use and access the internet at school and for the Corporation to issue an internet account to my child.

- I give permission for my child's image (photograph) to be published online.
- I give permission for the Corporation to transmit "live" images of my child (as part of a group) over the internet via a web cam.
- I authorize and license the Corporation to post my child's class work on the internet without infringing upon any copyright my child may own with respect to such class work. I understand only my child's first name will accompany such class work.
- I understand that I am financially responsible for book rental fees and any charges the school may assess. This can include, but is not limited to, lost books, cafeteria fees, library books, textbooks, equipment, technology, extra-curricular activities, fund raisings and tuition. I shall also be responsible for all reasonable costs of the collection of this account, which may include but is not limited to late fees, client collection fees, reasonable attorney's fees and court costs on any outstanding balance.

Student Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Grade Level: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_