



Parents: Please complete this form. This form is intended to determine if your child(ren) qualify to receive additional services under Title I, Part C.

Parent Occupational Survey

Has your family moved in order to work in another city, county, or state, in the last three (3) years? ___Yes ___No

If so, what is the date your family arrived in the city/town you reside? _____

Has anyone in your immediate family been involved in one of the following occupatins, either full or part-time or temporarily during the last three (3) years? (Check all that apply)

___ 1. Agriculture: planting/picking vegetables or fruits such as tomatoes, squash, grapes, onions, strawberries, blueberries, etc.

___ 2. Planting, growing, or cutting trees (pulpwood)/raking pine straw

___ 3. Processing/packing agricultural products

___ 4. Dairy/Poultry/Livestock

___ 5. Meatpacking/Meat processing/Seafood

___ 6. Fishing or fish farms

___ 7. Other (Please specify occupation): _____

Name of Student(s)	Name of School	Grade

Names of Parent(s) or Legal Guardian(s): _____

Current Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Thank You!

Please return this form to the school.

The answers to this survey will help determine if your child(ren) are eligible to receive supplemental services from the Title I, Part C Program.