

## Tennessee Migrant Education Program – Occupational Survey

Your child may qualify to receive <u>free</u> educational services. Please answer the following questions to help us determine their eligibility. Once completed, return this form to the school.

STUDENT FIRST NAME:			STUDENT LAST NAME:			DATE:				
School:							GRADE:			
Par	rent/Guardian I									
 1) I	In the past t	three years, hav	 ve your childr∉	en mov	ed to anothe	er city, st	ate, and	/or co	ountry?	
-	_ □ Yes	□ No	•						•	
		o you or anyone in your immediate family currently work or have worked (in the past three years) any of the following occupations?								
[	□ Yes	□ No								
ŧ	a. If yes, pl	If yes, please circle all that apply:								
		Processing & Pa (fruit, vegetables, eggs, pork, beef,	chicken, 📸		Agriculture/Field Work (planting, picking, and sorting crops; soil preparation; irrigation; fumigation; etc.)			3	Dairy/Cattle Raising (feeding, milking, rounding up, etc.)	
	Nursery/Greenhouse (planting, potting, pruning, watering, etc.)			Forestry (soil preparation, planting, growing, cutting trees, etc.)				Fishing/Fish Processing (catching, sorting, packing, transporting fish, etc.)		
•		"yes" to the que	•	•		erwise, yo	our form	is con	mplete.	
3) How long have you been in this county in Tennessee?										
	WEEKS:	Months:	YEA	.RS:						
	Home Address:									
_	Сіту:			STATE			ZIP:			
_	TELEPHONE (W	ITH AREA CODE):								
L										
		ool use only: If If you have ques		1) 212-95					ur district migrant grant Education	
-	School Distr				<u> </u>	Enrollment Date:				