



Maine Migrant Education Program

School Survey 2018-2019

School Name: _____ School District: _____

The following information is confidential and is for Migrant Education screening purposes only

Please fill out *completely* to find out if your child may qualify for our **free services** such as: **tutoring, free lunch, summer programs, and graduation support**

Have your children moved with you across school district lines in the last 3 years?

Yes No

Did you or another person in your home work in agriculture or fishing in the past three (3) years?

Yes No

If yes, please circle all that apply:



Feed Cattle, Processing, Packing



Dairy



Eggs



Blueberries



Cultivation, Soil Preparation



Fishing, Fish Processing



Lobstering



Harvest (fruit and vegetables)



Milling, Cotton



Trees, Planting, Cutting



Greenhouse, Nursery, Sod



Harvest Potatoes



Picking Apples

Print Parent/Guardian Name: _____ Phone: _____

Street Address: _____ City: _____

Please list children below:

First Name	Last Name	Grade	Date of Birth

Parent's/Guardian's signature: _____ Date: _____

Please return this form to one of your child's teachers, or to the central office of your school.
If you have any questions about the purpose of this form, please call 207-624-6722. Thank you!

SCHOOL STAFF: MAIL US THIS FORM IF QUESTIONS 1 & 2 BOTH SAY 'YES'
 For the most up to date version of this form go to website: <http://maine.gov/doe/migrant/forms>

Maine Migrant Education
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