



## IOWA MEP PARENT FORM

School District: \_\_\_\_\_ Date completed: \_\_\_\_\_

The answers to this form will help determine if your child (ren) is eligible to receive supplemental services

Name of Parent(s) or Legal Guardian(s): \_\_\_\_\_

Current Street Address: \_\_\_\_\_ Apt #: \_\_\_\_\_

City: State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Best Time to be Contacted: \_\_\_\_\_

1. Have both parents lived in this town continuously for the past 3 years or more?

YES \_\_\_\_\_ NO \_\_\_\_\_

2. If **YES** you may stop filling out the form, if **NO** please continue to question 3.

3. Please select any of the following jobs that the family have done in the last 3 years:

\_\_\_ Tyson, JBS, Monsanto, Smithfield, Seaboard, Pineridge farm, Loffredo

\_\_\_ Feeding, Milking, Taking care of Cows, Goats (Dairy Farm)

\_\_\_ Planting/ Detasseling- Corn, Soybeans (Monsanto, Syngenta, Stine)

\_\_\_ Pork, Chicken, Egg, Turkey Farms (Daybreak, Rembrand)

\_\_\_ Preparing farm fields

\_\_\_ Other agricultural work activity/Company \_\_\_\_\_

4. Name of student(s) / Name of School / Grade

_____	/	_____	/
_____	/	_____	/
_____	/	_____	/
_____	/	_____	/
_____	/	_____	/
_____	/	_____	/
_____	/	_____	/

**Disclaimer at bottom of the form-**

Please return this form to the school. Note for the school/district: When both "No" to #1 and one or more of the boxes from #3 is/are checked, please give this form to the migrant liaison to scan and email to [alex.johnson@iowa.gov](mailto:alex.johnson@iowa.gov). Please file original in student's records. For additional questions regarding this form, please contact Isbelia Arzola, Migratory Education Program Director at 515-326-5962 ([isbelia.arzola@iowa.gov](mailto:isbelia.arzola@iowa.gov))