Richard Woods, Georgia's School Superintendent
"Educating Georgia's Future"

School District: _____ **Date Completed:** _____

Parent Occupational Survey
Please complete this form to determine if your child(ren) qualify to receive additional services under Title I, Part C

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 occupations, 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.

Note for the school/district: When **both** "yes" **and** one or more of the boxes from 1 to 7 is/are checked, please give this form to the migrant liaison or migrant contact for your school/district. Please file original in student's records. Non-funded (consortium) systems should fax occupational parent surveys to the regional MEP office serving their district. For additional questions regarding this form, please call the MEP office serving your district:

GaDOE Region 1 MEP, P.0. Box 780, 201 West Lee Street Brooklet, GA 30415
Toll Free (800) 621-5217 Fax (912) 842-5440
GaDOE Region 2 MEP, 221 N. Robinson Street, Lenox, GA 31637
Toll Free (866) 505-3182 Fax (229) 546-3251

School District: _____ **Date Completed:** _____

Xogururinta Waalidka ee Shaqeed
Fadlan dhammaystir foomkan si loo go'aamiyo haddii ilmahaagu u qalmo helista adeegyo dheeraad ah
Title I, Qaybta C

Qoyskaagu ma u guureen si ay uga shaqeeyaan magaalo, degmo, ama gobol kale, saddexdii (3) sano ee tagay? ☐ Haa ☐ Maya

Hadday sidaa tahay, waa maxay taariikhda qoyskaagu soo galay magaalada aad deggan tahay?
_____

Miyey cid kamid ah qoyskaaga dhaw ku lug lahayd mid kamid ah shaqooyinka soo socda, ha noqoto mid wakhti buuxa ama wakhti badhki ama ama si kumeel gaadh ah saddexdii (3) sano ee u dambeeyey? (Hubi wixii khuseeya oo dhan)

☐ 1) Beeraha; tallaalista/gurista khudaarta ama midhaha sida tamaandhada, bocor, cinab, basal, ashkaax-caso, cinabka buluuga h iwm.
☐ 2) Tallaalista, beerista, ama jarista geedaha/farageeto marinta pine straw
☐ 3) Habaynta/cabbaynta waxsoosaarka beereed
☐ 4) Waxsoosaarka Caanaha/Shimbiraha/Xoolaha Nool
☐ 5) Cabbaynta hilibka/Habaynta hilibka/cuntada badda
☐ 6) Kalluumayga ama kalluun dhaqashada
☐ 7) Wax kale (Fadlan cayin shaqada): _____

Magaca Ardayga	Magaca Dugsiga	Fasalka
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Magaca Waalidka ama Wakiilka Sharciga ah _____

Cinwaanka Hadda: _____

Magaalada: _____ Gobolka: _____ Zip Code: _____ Taleefanka: _____

Mahadsanid!
Fadlan ku soo celi foomkan dugsiga
Jawaabaha xogururintan waxay caawin doonaan go'aaminta haddii ilmahaagu mutaystay helsa adeegyada kabka ee Barnaamijka Title I, Qaybta C.

Ogaysiiska dugsiga/degmada: Marka **labadaba** yihiin "haa" **oo** hal ama ka badan sanduuqada 1 ilaa 7 la saxo, fadlan sii foomkan la-shaqeeyaha muhaajiriinta ama la-xidhiidhka muhaajirka ee dugsigaaa/degmada. Fadlan ku fayl garee askalka diiwaanad ardayga. Nidaamyada aan la maalgalin waa inay fakas ugu diraan xogururinta waalidka ee shaqeed Wakaaladda Tacliinta Muhaajiriinta ee ka shaqaysta degmadaada. Wixii su'aalo dheeraad ah la xidhiidha foomkan, fadlan wac MEA ka shaqaysa degmadaada:

GaDOE Region 1 MEP, P.0. Box 780, 201 West Lee Street Brooklet, GA 30415
Bilaasha Hadal (800) 621-5217 Fakas (912) 842-5440
GaDOE Region 2 MEP, 221 N. Robinson Street, Lenox, GA 31637
Bilaasha Hadal (866) 505-3182 Fakas (229) 546-3251