



**Windthorst ISD  
 2019-2020 Family Survey**

Date: \_\_\_\_\_

Campus: \_\_\_\_\_

Dear Parent/Guardian,

In order to better serve your child/children, our school district is helping the State of Texas identify students who may qualify to receive additional educational services. **The information provided below will be kept confidential.**









Name of child: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Best time to contact you: \_\_\_\_\_

1. Have you done **temporary or seasonal agricultural or fishing related work within the last three (3) years** in any part of the United States? Yes\_\_\_ No\_\_\_ Please check all that apply.

  <input type="checkbox"/> Work with fruit, vegetables, grain, peanuts, pecans, wheat, cotton, on farms or ranches, fields & vineyards	 <input type="checkbox"/> Work in a cannery, granary or packing plant	 <input type="checkbox"/> Work on a dairy farm or ranch, temporarily	 <input type="checkbox"/> Baling hay, mending fences or caring for animals
 <input type="checkbox"/> Work in a slaughterhouse	 <input type="checkbox"/> Work on a poultry farm or fishery	 <input type="checkbox"/> Work in a plant nursery or orchard; planting, growing or harvesting trees	<input type="checkbox"/> Other similar work, please explain: _____ _____ _____

2. In the last 36 months, did you live/stay somewhere temporarily or move from one city, state or school district to another to complete temporary or seasonal agricultural work? Yes\_\_\_ No\_\_\_  
 If yes, from: \_\_\_\_\_ to \_\_\_\_\_  
 (city, state, or country) (city, state, or country)

3. Do you have a high school-aged child under the age of 22 *not currently enrolled* in school who lacks a U.S. issued high school diploma or Certificate of High School Equivalency? Yes\_\_\_ No\_\_\_

An education representative may contact you to find out whether your child is eligible for additional educational services under the School District, please return all forms to Region 9 ESC, Attn: Migrant Department

**School District, please return all forms to Region Migrant9ESC, Attn:EducationMigrantProgramDepartment..**

For ESC use only:  
 1<sup>st</sup> attempt: \_\_\_\_\_ 2<sup>nd</sup> attempt: \_\_\_\_\_ 3<sup>rd</sup> attempt: \_\_\_\_\_  
 NGS/MSIX History: Yes\_\_\_ No\_\_\_ Qualify: Yes\_\_\_ No\_\_\_ QAD: \_\_\_\_\_