

## Tennessee Parent Occupational Survey



Under Title I, Part C of the Elementary and Secondary Education Act (ESEA) our school district provides supplemental services to the children of agricultural workers who have recently moved. This survey is to help the school identify if your child might qualify for these free supplemental services such as tutoring, school supplies, summer camps in select counties, and other free services. Please answer the following questions and return this form to your child's school. **The information provided below will be kept confidential.**

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Parent/Guardian First & Last Name

\_\_\_\_\_  
Student First Name






\_\_\_\_\_  
Student Last Name

\_\_\_\_\_  
School Name

\_\_\_\_\_  
Student Grade

**1. Have you or an immediate family member performed any agriculture or fishing jobs temporarily or seasonally, in any part of the United States, in the past 3 years? Check all that apply.**

NO  
 YES. Check all that apply:

<p><b>Agriculture/Field Work:</b> planting, picking, sorting crops, soil preparation, irrigation, fumigation</p> 	<p><b>Processing &amp; Packaging:</b> fruit, vegetables, chicken, pork, beef, eggs, etc.</p> 	<p><b>Dairy/Cattle Raising:</b> feeding, milking, rounding up.</p> 
<p><b>Nursery/Greenhouse:</b> planting, potting, pruning, watering, harvesting</p> 	<p><b>Forestry:</b> soil preparation, planting, cutting trees; does not include landscaping.</p> 	<p><b>Other:</b> Any other agriculture or fishing work, please list here:</p> <p>_____</p> <p>_____</p>

**2. In the past 3 years, has your family moved to another state, city, school district, and/or county?**

NO  
 YES. My family has moved within the past 3 years. Indicate how long ago below.

\_\_\_\_\_ Years      \_\_\_\_\_ Months      \_\_\_\_\_ Weeks

**If you answered "Yes" to question 1, please complete the information below. A staff from the Migrant Education Program will follow up with your family to verify if you qualify for free services.**

\_\_\_\_\_  
Home Street Address

\_\_\_\_\_  
Apt #

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Language

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Best Day of Week and Time to Call

**For School Use Only:** Please forward all surveys with a "YES" response to Question 1 to your district migrant liaison for them to submit to the ID&R Team through [tn.msedd.com](http://tn.msedd.com). If you have any questions, email the TN MEP ID&R Team: [idr@tn-mep.net](mailto:idr@tn-mep.net)

Student State ID:

Enrollment Date:

District ID: