



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, Taking care of Cows, Goats (Dairy Farm), Milking

___ 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. Please file original in student's records. For additional questions regarding this form, please contact Isbelia Arzola (515) 326-5962 <isbelia.arzolaarocha@iowa.gov>