

# PARENT-PUPIL SURVEY FORM for OCTOBER 13, 2020

## I. STUDENT INFORMATION

Printed name of student \_\_\_\_\_

Birthdate (month/day/year) \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

If the above address is on federal property, check which federal property.

Fort Benning Military Reservation  E. Canty  Warren Williams  Ashley Station School

Name \_\_\_\_\_ Homeroom Teacher's Name \_\_\_\_\_

## II. MILITARY INFORMATION

A. If either parent was an **ACTIVE DUTY** member of the uniformed services of the United States on **October 13, 2020**, check the branch of service and provide the parent's name and rank below. (*Include Reserves only if on ACTIVE DUTY full-time on October 13, 2020. For reserves on active duty, provide a copy of the orders.*)

Army  Navy  Air Force  Marines  Coast Guard  NOAA  USPH

Army Reserve\*  Navy Reserve\*  Air Force Reserve\*  
 Marines Reserve\*  Coast Guard Reserve\*  National Guard\* \*Must attach a copy of orders.

Print name and rank of Parent/Guardian on Active Duty on October 13, 2020.

Name \_\_\_\_\_ Rank \_\_\_\_\_

B. If either parent was an **ACTIVE DUTY** foreign military officer who was also an accredited foreign government official on October 13, 2020, provide the information below.

Parent/Guardian Name \_\_\_\_\_ Rank \_\_\_\_\_

Name of Foreign Government \_\_\_\_\_

## III. CIVILIAN EMPLOYMENT INFORMATION

Was either parent employed as a civilian on Federal Property anywhere in Georgia on October 13, 2020?

Yes  No If yes, complete items 1, 2, and 3 below.

1. Name of Civilian Parent/Guardian employed on federal property \_\_\_\_\_

2. Name of Civilian Parent/Guardian's Employer (see note below) \_\_\_\_\_

Note: Examples include, but are not limited to: Dept. of Army, Dept. of Navy, Dept. of Defense, VA, Corps of Engineers, DEH, AAFES, Dept. of Justice, IRS, NAF, Private Contractor for Construction, etc. (provide company name)

\_\_\_\_\_ Bldg# and Street Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

3. Address of Federal Property in Georgia where Civilian Parent/Guardian is employed

Name of Federal Property \_\_\_\_\_

\_\_\_\_\_ Bldg# and Street Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

By signing this form, I am certifying that all typed and written information on this form is accurate and complete as of the survey date. \_\_\_\_\_

Signature of Parent/Guardian

Date \_\_\_\_\_ Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_