

Impact Aid Survey Form
The survey date is September 23, 2022

This information is the basis for payment to your school district of federal funds under the Impact Aid Program (Title VII of the Elementary and Secondary Education Act) and may be provided to the U.S. Department of Education if the school district's application for payment is audited. This form must be signed and dated for the school district to receive funds based on this information. All boxes must be filled in with complete information, if applicable.

STUDENT INFORMATION

Student's Last Name	First Name and M.I.	Date of Birth	Grade	School Name
Home Address on the Survey Date (No P.O. Boxes)		City		State
If the student lives on federal property, identify the name of the property (check only one) and provide the house number or location/legal description.		Name of Federal Property <input type="checkbox"/> LITTLE WOUND SCHOOL HOUSING (HOUSE # _____) <input type="checkbox"/> CRAZY HORSE SCHOOL HOUSING (HOUSE # _____) <input type="checkbox"/> WANBLEE HOUSING (HOUSE # _____) <input type="checkbox"/> POTATO CREEK HOUSING (HOUSE # _____) <input type="checkbox"/> BADLANDS NATIONAL PARK HOUSING (HOUSE # _____) <input type="checkbox"/> OTHER FEDERAL OR INDIAN PROPERTY: _____ <small>(If residence is on Trust Land or other federal property, please describe the location/legal description if possible)</small>		

PARENT/GUARDIAN EMPLOYMENT INFORMATION: EMPLOYED ON FEDERAL PROPERTY

Enter information in this section regarding the parent/guardian with whom the student resides if either person was employed on federal property or reported to work on federal property <i>on the survey date</i> . Enter the parent/guardian's name as it appears on the employer's payroll record.			
Parent/Guardian's Last Name	First Name and M.I.	Name of Parent/Guardian's Employer	
Name of Federal Property			
Address of Federal Property		City	State
			Zip Code

PARENT/GUARDIAN EMPLOYMENT INFORMATION: FARMING, GRAZING, RANCHING

Enter information in this section regarding the parent/guardian with whom the student resides if either person was employed on federal property or reported to work on federal property that was engaged in farming, grazing, or ranching <i>on the survey date</i> whether as an employee or self-employed.			
Parent/Guardian's Last Name	First Name and M.I.	Name of Parent/Guardian's Employer	
Name of Federal Property			
Address of Federal Property		City	State
			Zip Code
Permit Number	Township	Range	Section

By signing and dating 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** _____