# **REQUIRED DATA ELEMENTS**

### Family Data

Parent/Guardian 1 Last Name Parent/Guardian 1 First Name Parent/Guardian 2 Last Name Parent/Guardian 2 First Name Current Address City State Zip Telephone

### Child Data

Residency Date
Last name 1
Last name 2
Suffix
First name
Middle name
Sex
Birth Date
Multiple Birth Flag (or MB)
Birth Date Verification Code (or Code)

# **REQUIRED DATA SECTIONS**

Qualifying Moves & Work Section
1. The child(ren) listed on this form moved due to economic necessity from a residence in <u>School district</u> /
<u>City</u> / <u>State</u> / <u>Country</u> to a residence in <u>School district</u> / <u>City</u> / <u>State</u> .
<ul> <li>2. The child(ren) moved (complete both a. and b.): <ul> <li>a. as the worker, OR with the worker, OR to join or precede the worker.</li> <li>b. The worker, <u>First Name and Last Name of Worker</u>, is the child or the child's parent/guardian spouse.</li> <li>i. The child(ren) moved on <u>MM/DD/YY</u>.</li> <li>ii. (Complete if "to join or precede" is checked in #2a.) The worker moved on <u>MM/DD/YY</u>. (provide comment)</li> </ul> </li> <li>3. The Qualifying Arrival Date was <u>MM/DD/YY</u>.</li> <li>4. The worker moved due to economic necessity on <u>MM/DD/YY</u>, from a residence in <u>School District/ City/</u></li> </ul>
<ul> <li>a. □ engaged in new qualifying work soon after the move (provide comment if worker engaged more than 60 days after the move), OR</li> <li>b. □ actively sought new qualifying work after the move AND has a recent history of moves for qualifying work (provide comment)</li> </ul>
5. The qualifying work,* describe agricultural or fishing work was (make a selection in both a, and b.):
a.  seasonal OR  temporary employment  *If applicable, check:
b. agricultural OR fishing work personal subsistence (provide comment)
<ul> <li>6. (Complete if "temporary" is checked in #5a) The work was determined to be temporary employment based on:</li> <li>a. □ worker's statement (provide comment), OR</li> <li>b. □ employer's statement (provide comment), OR</li> <li>c. □ State documentation forEmployer</li> </ul>
Comment Section (Must include 2bii, 4a, 4b, 5, 6a and 6b of the Qualifying Move & Work Section, if applicable)

# **Interviewee Signature Section**

I understand the purpose of this form is to help the State determine if the child(ren)/youth listed on this form is/are eligible for the Title I, Part C Migrant Education Program. To the best of my knowledge, all of the information I provided to the interviewer is true. [This section must include fields labeled "Signature," "Relationship to the child(ren)," and "Date".]

# **Eligibility Certification Section**

I certify that based on the information provided to me, which in all relevant aspects is reflected above, I am satisfied that these children are migratory children as defined in 20 U.S.C. 6399 and implementing regulations, and thus eligible as such for MEP services. I hereby certify that, to the best of my knowledge, the information is true, reliable, and valid and I understand that any false statement provided herein that I have made is subject to fine or imprisonment pursuant to 18 U.S.C. 1001. [The section must include fields labeled "Signature of Interviewer," "Signature of Designated SEA Reviewer," and "Date" for each signature.]

1105/11

# NATIONAL CERTIFICATE OF ELIGIBLITY

I. FAMILY DATA								
Parent/Guardian 1: LastN	Vame FirstName		Parent/Guardian 2:	Last Name	First Name			
Current Address:			City	State Zip	p Te	lephone		
II. CHILD DATA						1 1		
Last Name 1	Last Name 2	Suffix	First Name	Middle Name	Sex Birth Date	MB Co	de Residency Date	
				Q-				
				A				
III. QUALIFYING MOVES & WORK	<b>x</b>		applicab	MENTS (Must include 2bii, 4b, 4c, 5, 6a a	and 6b of the Qualifying	Moves & Work	Section, if	
b. The worker, <u>First Name and Last Na</u> i. The child(ren) moved on M	he worker, OR	□ parent/gu	(provide comment)					
3. The Quantying Arrival Date was	<u>MM/DD/YY</u> .		V. INTE	ERVIEWEE SIGNATURE				
<ul> <li>4. The worker moved due to economic necessity onMM/DD/YY from a residence in <u>School district</u> / <u>City</u> / <u>State</u> , and:</li> <li>a. □ engaged in new qualifying work soon after the move (provide comment if worker engaged more than 60 days after the move); OR</li> <li>b. □ actively sought new qualifying work, AND has a recent history of moves for qualifying work (provide comment)</li> </ul>				I understand the purpose of this form is to help the State determine if the child(ren)/youth listed on this form is/are eligible for the Title I, Part C, Migrant Education Program. To the best of my knowledge, all of the information I provided to the interviewer is true.				
b. $\Box$ actively sought new qualifying	work, AND has a recent history of moves f	or qualifying						
<ol> <li>The qualifying work,*</li> <li>a. □ seasonal OR □ temporary e</li> <li>b. □ agricultural OR □ fishing v</li> </ol>	employment *If applicable, che	ck:	e comment)	GIBILITY DATA CERTIFICATION	onship to the child(ren)	Date	_	
<ul> <li>6. (Complete if "temporary" is checked in #5a) The work was determined to be temporary employment based on:</li> <li>a. worker's statement (provide comment), OR</li> <li>b. employer's statement (provide comment), OR</li> <li>c. State documentation for <u>Employer</u>.</li> </ul>				I certify that based on the information provided to me, which in all relevant aspects is reflected above, I am satisfied that these children are migratory children as defined in 20 U.S.C. 6399 and implementing regulations, and thus eligible as such for MEP services. I hereby certify that, to the best of my knowledge, the information is true, reliable, and valid and I understand that any false statement provided herein that I have made is subject to fine or imprisonment pursuant to 18 U.S.C. 1001.				
	<b>S</b> <sup>*</sup>		Signatu	re of Interviewer	Date			
			Signatu	re of Designated SEA Reviewer	Date			