

CHESAPEAKE PUBLIC SCHOOLS
IMPACT AID PROGRAM SURVEY CARD
SURVEY DATE: October 20, 2026

Please complete this card by filling in each applicable box and correcting any errors in the printed information. **Directions for completing each box are on the back.** A card should be completed for each Chesapeake Public Schools (CPS) student. Impact Aid funds support all students and programs in our school division. **Signature and date are required.**

OFFICE USE ONLY ☐

SECTION A – STUDENT INFORMATION: BOXES 1-9			STUDENT NUMBER:																						
1. <u>Student's Name (Last, First, Middle)</u>	2. <u>Student's Birthdate</u>	3. <u>Grade</u>	4. <u>School</u>																						
5. <u>Home Address (Street Number, Name, Apt #, City, State, Zip)</u>		6. <u>Phone</u>	7. <u>HR#</u>	8. <u>Homeroom Teacher</u>																					
9. <u>If home address is on Federal Property, name the Federal Property:</u> <i>Note: See back of this card for names of federal property locations.</i>																									
SECTION B - BOXES 10-16 ⇨ UNIFORMED SERVICES OR FOREIGN MILITARY: Was EITHER parent/guardian on active duty in the Uniformed Services on <u>October 20, 2026?</u> Complete information in THIS section, SIGN AND DATE in BOX 21. If both parents are active duty, indicate only one.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: center; padding: 5px;">US ACTIVE DUTY UNIFORMED SERVICES</th> </tr> <tr> <td colspan="3" style="padding: 5px;">10. <u>Parent/Guardian Name (First, MI, Last)</u></td> </tr> <tr> <td style="padding: 5px;">11. <u>Branch of Service (Ex: US Navy, US Army, Etc.)</u></td> <td colspan="2" style="padding: 5px;">12. <u>Military Rank or Pay Grade (Ex: E-3, O-1, Etc.)</u></td> </tr> <tr> <th colspan="3" style="text-align: center; padding: 5px;">ACCREDITED FOREIGN GOVERNMENT OFFICIAL AND FOREIGN MILITARY OFFICER</th> </tr> <tr> <td colspan="3" style="padding: 5px;">13. <u>Parent/Guardian Name (First, MI, Last)</u></td> </tr> <tr> <td style="padding: 5px;">14. <u>Branch of Service</u></td> <td style="padding: 5px;">15. <u>Military Rank or Pay Grade</u></td> <td style="padding: 5px;">16. <u>Name of Foreign Government</u></td> </tr> </table>			US ACTIVE DUTY UNIFORMED SERVICES			10. <u>Parent/Guardian Name (First, MI, Last)</u>			11. <u>Branch of Service (Ex: US Navy, US Army, Etc.)</u>	12. <u>Military Rank or Pay Grade (Ex: E-3, O-1, Etc.)</u>		ACCREDITED FOREIGN GOVERNMENT OFFICIAL AND FOREIGN MILITARY OFFICER			13. <u>Parent/Guardian Name (First, MI, Last)</u>			14. <u>Branch of Service</u>	15. <u>Military Rank or Pay Grade</u>	16. <u>Name of Foreign Government</u>		
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SECTION C - BOXES 17-20 ⇨ WORKS ON FEDERAL PROPERTY (CIVILIAN): Was EITHER parent/guardian with whom the student resided employed on federal property in Virginia on October 20, 2026? Complete information in THIS section, SIGN AND DATE in BOX 21. If both parents are employed on federal property, indicate only one.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="4" style="text-align: center; padding: 5px;">CIVILIAN EMPLOYED ON FEDERAL PROPERTY</th> </tr> <tr> <td colspan="4" style="padding: 5px;">17. <u>Parent/Guardian Name (First, MI, Last)</u></td> </tr> <tr> <td colspan="4" style="padding: 5px;">18. <u>Employer Name (Ex: Department of Defense, Company or Agency Name, *NO ABBREVIATIONS*)</u></td> </tr> <tr> <td style="padding: 5px;">19. <u>Work Location Address (Street # & Name/ Ship Name & Hull #)</u></td> <td style="padding: 5px;"><u>City or Ship Homeport</u></td> <td style="padding: 5px;"><u>State</u></td> <td style="padding: 5px;"><u>Zip Code</u></td> </tr> <tr> <td colspan="4" style="padding: 5px;">20. <u>Name of Federal Property (Ex: Naval Station Norfolk, Fort Eustis, Norfolk Naval Shipyard, Etc.)</u></td> </tr> </table>			CIVILIAN EMPLOYED ON FEDERAL PROPERTY				17. <u>Parent/Guardian Name (First, MI, Last)</u>				18. <u>Employer Name (Ex: Department of Defense, Company or Agency Name, *NO ABBREVIATIONS*)</u>				19. <u>Work Location Address (Street # & Name/ Ship Name & Hull #)</u>	<u>City or Ship Homeport</u>	<u>State</u>	<u>Zip Code</u>	20. <u>Name of Federal Property (Ex: Naval Station Norfolk, Fort Eustis, Norfolk Naval Shipyard, Etc.)</u>			
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BOX 21 - The information you provide is used to determine if CPS is eligible to receive federal funds under the Impact Aid Program in Title VII of the Every Student Succeeds Act (ESSA) and may be provided to the U.S. Department of Education if the school division's Impact Aid application is selected for an audit. This information is treated as confidential under Federal and Virginia privacy laws and is used only to qualify for funding under Impact Aid regulations. *By signing this form, I certify that all typed and written information on this form is accurate and complete as of <u>October 20, 2026.</u> SIGNATURE OF PARENT/GUARDIAN DATE																									
PLEASE LIST ON THE BACK IN BOX 22 NAMES OF OTHER STUDENTS IN THE SAME HOUSEHOLD ATTENDING A CHESAPEAKE PUBLIC SCHOOL ⇨																									
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DIRECTIONS

GENERAL DIRECTIONS: All information should be as of **October 20, 2026**. Please fill in all applicable boxes on the front of the survey card and Box 22 on this side of the card. If printed information is incorrect, cross it out and write the correct information in the same box on the front of the card or on this side of the card in the area titled, *Additional Information/Corrections*. Whenever an address is requested, a complete address must be given which includes a street number and name, city, state and zip code. If you have any questions about Impact Aid or this survey card, please contact the CPS Budget Office at 842-4093 or by email at Nicole.Wilson@cpschools.com.

SECTION A: STUDENT INFORMATION, BOXES 1-9

BOXES 1-8: Complete these boxes or make corrections as described above in the *General Directions*.

BOX 9: Must be completed if the student resides in one of the following locations: **1) Northwest Housing – Pecan Crescent, Village at Carolina Meadows, Village at Cypress Way, or 2) HUD Housing – Broadlawn I Apts, Broadlawn II Apts, Schooner Cove Apts, Owens Village Apts.**

SECTION B: ACTIVE DUTY UNIFORMED SERVICES/FOREIGN MILITARY, BOXES 10-16

BOXES 10-16: Fill out this section if either parent/guardian was on Active Duty in the Uniformed Services or is both an Accredited Foreign Government Official and a Foreign Military Officer on October 20, 2026. Active Duty parent does not need to reside with the student to be listed on the card. If both parents are active duty, indicate only one. *If this section is not applicable then move on to Section C.*

BOXES 10 & 13: Name: Provide the parent/guardian name. Please note if stepparent or guardian.

BOXES 11 & 14: Branch of Service: Provide the branch of service. If U.S. National Guard or Reserves mobilized by Presidential Executive Orders 13223 of September 14, 2001 and Title 10 USC please **provide a copy of the Activation Orders.**

BOXES 12 & 15: Military Rank or Pay Grade: Provide military rank or pay grade (Example: E-6, O-5).

BOX 16: Foreign Government Name: Provide the name of the foreign government if Foreign Military.

SECTION C: CIVILIAN WORKING ON FEDERAL PROPERTY, BOXES 17-20

BOXES 17-20: Fill out this section if either parent/guardian with whom the student resided was employed on federal property on October 20, 2026. If both parents are employed on federal property, indicate only one. Remote workers fill out this section if the parent/guardian ever reports to an office/building located on federal property. *If this section is not applicable then please sign and date the card in Box 21.*

BOX 17: Name: Provide the parent/guardian name. Please note if stepparent or guardian.

BOX 18: Employer Name: Provide the EMPLOYER'S full name, **NO ABBREVIATIONS PLEASE**. NOTE: A civil service employee should state, at a minimum, the federal agency such as the Department of Defense. A parent/guardian employed by a federal contractor should state the contracting company's name **NOT** the federal agency or command of the work location. A self-employed parent/guardian should indicate *self-employed*.

BOX 19: Complete Address of Work Location: Provide the **complete work address** of the parent/guardian work site location. NOTE: If reporting to work on a ship, name the ship, ship hull number, and the ship homeport, state and zip code. If on leave/vacation, working remotely or on temporary assignment on October 20, 2026, state your **usual/designated work location address**.

BOX 20: Name of Federal Property Employed On: Provide the **OFFICIAL/FULL** name of the federal property employed on per the work location address provided in Box 19, **NO ABBREVIATIONS PLEASE**. If reporting to work on a ship, provide the ship name and ship hull number.

BOX 21: A parent/guardian must sign and date the card.

BOX 22: Enter the information or state N/A below.

BOX 22: LIST THE NAMES, BIRTHDATES, SCHOOLS, AND GRADES OF OTHER STUDENTS LIVING IN THE SAME HOUSEHOLD ATTENDING A CHESAPEAKE PUBLIC SCHOOL.

NAME	BIRTHDATE	SCHOOL	GRADE

ADDITIONAL INFORMATION/CORRECTIONS

Please note the corresponding Box Number for information provided below.
