

Sample Cumberland County Schools Impact Aid Verification Form Card

This information is the basis for payment to Cumberland County Schools of federal funds under Title VII of ESSA, Impact Aid program. The information collected from this survey is used to count the number of federally connected students. All information should be accurate as of 10/17/2023.

Student Name		Birthdate	Complete Address	City, State, Zip	
[REDACTED]		2/7/2006	[REDACTED]	Fayetteville, NC 28311	
Survey Date	School Name	HomeRoom	Student ID	Grade	EC
10/17/2023	E E Smith High	12Johnson-D5	[REDACTED]	12	
If the above address is military housing or federal low-rent housing project, enter the name:					

UNIFORMED SERVICES Enter information in section below regarding the parent/guardian if either person was on active duty in the Uniformed Services of the United States on the survey date.

Active Duty Parent/Guardian 1 (Last Name, First Name, MI)	Branch	Rank/Grade
Active Duty Parent/Guardian 2 (Last Name, First Name, MI)	Branch	Rank/Grade

FOREIGN MILITARY Enter information in this section regarding the parent/guardian if either person was both an accredited foreign government official and a foreign military officer on the survey date.

(Last Name, First Name, MI)	Foreign Government	Branch	Rank/Grade

CIVILIAN FEDERAL EMPLOYEES Enter information in this section regarding parent/guardian with whom the student resided IF either person was employed on federal property on the survey date

Civilian Employee Parent/Guardian 1 (Last Name, First Name, MI)	Employer Name
Check the name of the federal location on which CIVILIAN is employed <input type="checkbox"/> Fort Liberty 4700 Knox Street, Fort Liberty, NC 28310 <input type="checkbox"/> POPE Army Airfield 505 Virgin St, Pope Army Airfield, NC 28308 <input type="checkbox"/> VA Medical Center 2300 Ramsey Street, Fayetteville, NC 28301 <input type="checkbox"/> Shugart Elem/Mid Schools 4800 Camel Road, Cameron, NC 28326 <input type="checkbox"/> Other: Provide name and complete address:	
Civilian Employee Parent/Guardian 2 (Last Name, First Name, MI)	Employer Name
Check the name of the federal location on which CIVILIAN is employed <input type="checkbox"/> Fort Liberty 4700 Knox Street, Fort Liberty, NC 28310 <input type="checkbox"/> POPE Army Airfield 505 Virgin St, Pope Army Airfield, NC 28308 <input type="checkbox"/> VA Medical Center 2300 Ramsey Street, Fayetteville, NC 28301 <input type="checkbox"/> Shugart Elem/Mid Schools 4800 Camel Road, Cameron, NC 28326 <input type="checkbox"/> Other: Provide name and complete address:	

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

Signature of Parent/Guardian	Date