

Lapwai School District 341

Student Impact Aid Survey Form

Student Information	SURVEY DATE: NOVEMBER 4, 2021		
School			
Student- First Name			
Student- Last Name			
Student- Date of Birth			
Student- current Grade			
Physical Address			
City			
ID/Zip			
Trust Property?	YES	NO	NOT SURE
Allotment Number?			
Property Owner?			
Parent/Guardian Employment			
Enter information in this section if either parent or guardian spent more than 50 percent of his or her working time on federal property (whether as an employee or self-employed.)			
Parent/Guardian Name			
Parent/Guardian Employer			
Department.			
Address of Federal Property			
Please fill in the above boxes with complete and accurate information			

Please list any other students you have attending Lapwai Schools at current address

Name	DOB	Grade	School
			____ES ____ MS/HS
			____ES ____ MS/HS
			____ES ____ MS/HS
			____ES ____ MS/HS
			____ES ____ MS/HS

***By signing this form I am I certifying the above information is correct as of November 4, 2021.**

Signature Parent/Guardian

Date

Please email to daiken@lapwai.org