

COYLE PUBLIC SCHOOL — IMPACT AID INFORMATION

PLEASE CHECK THE FOLLOWING THAT APPLY:

MY CHILD:

- ___A. RESIDES WITH MILITARY PARENT. ON BASE___OFF BASE___
- ___B. HAS A PARENT IN THE MILITARY, BUT DOESN'T RESIDE WITH THAT PARENT
- ___C. RESIDES WITH CIVILIAN PARENT EMPLOYED ON FEDERAL OR TRIBAL PROPERTY
- ___D. RESIDES ON FEDERAL LAND USED FOR AGRICULTURE
- ___E. RESIDES IN FEDERAL HOUSING (LANGSTON HOUSING AUTHORITY ETC.)
- ___F. HAS A PARENT EMPLOYED BY THE FEDERAL GOVERNMENT
- ___G. NONE OF THE ABOVE APPLY TO MY FAMILY

I CERTIFY THAT MY CHILD IS A RESIDENT OF COYLE PUBLIC SCHOOL DISTRICT AND THAT THE INFORMATION PROVIDED ABOVE IS TRUTHFUL TO THE BEST OF MY KNOWLEDGE.

PARENT/GUARDIAN SIGNATURE

DATE

CHILD'S NAME