

_____ Date

PLACERVILLE UNION SCHOOL DISTRICT 20__-20__ Armed Forces Member Survey

This document is part of the accountability requirements under the Every Student Succeeds Act (ESSA).

Student Name – Last	First	Middle
Gender (circle one) M F	Date of Birth:	Grade:
School	Teacher	

1) Is either Parent/Guardian on active military duty? Yes No

(Active Duty is defined as full-time duty in the Army, Navy, Air Force, Marine Corps, Coast Guard or full-time National Guard)

2) If yes, please check which military branch.

Army Navy Air Force Marine Corps Coast Guard

Full-time National Guard

3) Activation date _____
(MM/DD/YYYY)

For Office Use Only: Program Start Date: _____ (Aeries Data Entry)

(Start date must be within enrollment period 1. New student, active military, start date will be the 1st day of school. 2. Existing student, newly active military, use parent's activation date 3. No end date needed unless student moves from PUSD)

R 06/24/2020