FEDERAL IMPACT AID STUDENT-PARENT SURVEY October 6, 2020

The purpose of this card is to assist our public sc hools in applying for much needed financial assistance under existing federal laws for the operation of public schools. Please complete and sign the survey and have your child return it to the te acher immediately. This information will be

kept confidential. Your cooperation is greatly appreciated .

Thank you, Dr. Kenneth Bradshaw, Superintendent of Richmond County Schools

STUDENT INFORMATION				
1. Student's Last Name	First Name		te of BMth_	Da
2. Address	City	State	ho zie Code	P

ADDRESS LOCATION

1. Is the above home address located on