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| Re-Interview No.: | | | | | | | | |
| Student Name: | | | | Qualifying Arrival Date:  **(Target QAD)** | | | | |
| District: | | | DOB: | | | | Grade: | |
| Address: ❑ Same as COE ❑ Different from COE (include new address below) | | | | | | | | |
| **❑ Attempt #1** | **❑ Attempt #2** | | | | **❑ Attempt #3** | | | |
| Date: Time: | Date: Time: | | | | Date: Time: | | | |
| ❑ Home/Made Contact | ❑ Home/Made Contact | | | | ❑ Home/Made Contact | | | |
| ❑ Declined Interview | ❑ Declined Interview | | | | ❑ Declined Interview | | | |
| ❑ No one home/No Answer | ❑ No one home/No Answer | | | | ❑ No one home/No Answer | | | |
| ❑ Moved away (select reason below) | ❑ Phone Call | | | | ❑ Phone Call | | | |
| **Moved Away**  ❑ New occupants in residence ❑ Neighbor indicated family moved  Indicate reason: ❑ Residence empty/abandoned ❑ Other: | | | | | | | | |
| **Interviewer (print name):** | | | | | | | | |
| **Person  Interviewed (print name):** | | | (Check relationship to student)  ❑ Father ❑ Mother ❑ Guardian ❑ Self ❑ Spouse ❑ Other: | | | | | |
| 1. **When and where was [insert name of worker on COE] living before moving here?  What was the type of work did he/she do?** (Capture recent history of moves.)   *¿Cuándo y dónde vivió el trabajador antes de mudarse hacia acá? ¿Qué tipo de trabajo hizo?*  **Move A – current move; Move B – move before A (if occurred); Move C – move before B (if occurred)** | | | | | | | | |
| **When/*Cuándo*** | | **From-To/*Desde-Hacia*** | | | | **Work/*Trabajo*** | | |
| **Move A Date:** mm/dd/yy  Within 36 months of [COE sec. III no. 4]?  ❑ Yes ❑ No | |  | | | |  | | |
| **Move B Date:** mm/dd/yy  Within 36 months of [COE sec. III no. 4]?  ❑ Yes ❑ No | |  | | | |  | | |
| **Move C Date:** mm/dd/yy  Within 36 months of [COE sec. III no. 4]?  ❑ Yes ❑ No | |  | | | |  | | |
| 1a. **If [COE Sec. III No. 4 date] is not listed in question #1, ask for an explanation.** | | | | | | | | |
| 1. **When the worker moved on [COE Sec. III No. 4 date]**, **what type of work did he/she do or actively look for?** (ask #2a if “temporary” is checked)   *¿Cuándo se mudó el trabajador en , que tipo de trabajo hizo o buscó activamente? (pregunta #2a si marca “temporary”)* | | | | | | | | ❑ Agricultural *OR*  ❑ Fishing  **AND**  ❑ Seasonal *OR*  ❑ Temporary |
| 2a. (Ask if “temporary” is checked in #2) **When the work first started, how long did the worker intend to work? (Check one)**  *Cuando empezó el trabajo, ¿cuánto tiempo intentó trabajar?* | | | | | | | | ❑ 0-3 months  ❑ 3-6 months  ❑ 6-9 months  ❑ 9-12 months  ❑ Permanent |

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| 1. **Did the worker move due to economic necessity, from one residence to another, and across school district lines?**   *¿El trabajador se mudó debido a necesidades económicas, de una residencia, y cruzando distritos escolares?* | ❑ Yes ❑ No | |
| 1. **Did the child move due to economic necessity, from one residence to another, and across school district lines?**   *¿El niño/niña se mudó debido a necesidades económicas, de una residencia a otra, y cruzando distritos escolares?* | ❑ Yes ❑ No | |
| 3a./4a. **If the response to #3 and/or #4 is “no”, ask for an explanation.** | | |
| 1. **Did the child last move ❑ AS ❑ WITH ❑ TO-JOIN or PRECEDE the worker?**   (If TO-JOIN/PRECEDE, what was the last date the child moved?) Date: mm/dd/yy  *¿Se mudó el niño/la niña como, junto con, para unirse con o antes del trabajador? Si fue para unirse con o antes del trabajador, ¿en qué fecha se mudó el niño/la niña? Fecha:* | | |
| 1. **List the full names and ages (at time of move) of all the children who made the move on [Target QAD]?**   *¿Cuáles son los nombres completos y las edades de todos los niños que hicieron la movida/mudanza en (Target QAD)?* | | |
| 1. **Are the children that are living with you under 22 years old?**   *¿Los niños que viven con usted tienen menos de 22 años?* | | (Under 22 years old?)  ❑ Yes ❑ No |
| 1. **Have any of your children graduated from high school or obtained a GED? If yes, when did they graduate?**   *¿Se han graduado de la escuela superior o han obtenido un diploma de equivalencia (GED) algunos de sus hijos? ¿Si? ¿Cuándo (mes, año)?* | | ❑ Yes ❑ No  If yes, when (MM/YY)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Re-interviewer notes (optional) | | |
| To the best of my knowledge, the information documented on this form is correct. | | |
| *De acuerdo a mi conocimiento y entendimiento, la información estipulada en éste documento es verdadera.* | | |
| Signature of person interviewed: Date: | | |
| Signature of re-interviewer: Date: | | |
| ***If re-interview is completed by phone –***  Location (city, state) of person interviewed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone number of person interviewed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |

**FOR REVIEW PANEL MEMBER USE ONLY**

Review Panel Member Signature Review Date:

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| * Eligible as documented on COE | * Eligible with corrections on COE required | * Need more information to make determination | * Not Eligible |