KANSAS CERTIFICATE OF ELIGIBILITY PROJECT NAME: _____

SECTION I: PARENT DATA

COE #

1A. Father's Name (Last, First):	2A. Current Father/Guardian's Name (Last, First):		
1B. Mother's Name (Last, First):	2B. Current Mother/Guardian's Name (Last, First):		
3A. Current Address:	3B. City:	3C. State:	3D. Zip Code:

SECTION II: CHILD DATA

4A. Name: Last, First, Middle	5. Sex	6. Birthdate	7. Ver.	8. Birthplace (Use appropriate abbreviation) City / State / Country	9. Race Code	10. Enrollment Date	11. Grade	Student ID No.
1.		/ /		/ /				
2.		/ /		/ /				
3.		/ /		/ /				
4.		/ /		/ /				
5.		/ /		/ /				

SECTION III: ELIGIBILITY DATE - THE CHILDREN LISTED MOVED:

12. From: City / State / Country / / | 13. To: City / State / | 14. Qualifying Arrival Date / / | 15. The Children Moved ☐ With ☐ To Join ☐ On His/Her Own

16. ☐ Parent ☐ Guardian Worker's Name: _____
☐ Other Family Member ☐ Child Phone #: _____

To enable that person to obtain or seek **AS AN IMPORTANT PART LIVELIHOOD:**
17. ☐ Temporary Employment 18. ☐ Agricultural Related
☐ Seasonal Employment ☐ Fishing Related

19. STATUS

20. ☐ A. The employer hires the worker to perform a task that has a clearly defined beginning and ending date and is not one of a series of activities that is typical of permanent employment (e.g., digging an irrigation ditch or building a fence from May to August).
☐ B. The employer hires the worker for a limited time frame.
☐ C. The employer hires additional workers during periods of peak demand.
☐ D. An "Industrial Survey" establishes that the job may be considered temporary.
☐ E. The agricultural or fishing work may be permanent but the interviewer has specific reason to believe that the worker does not intend to perform the tasks indefinitely.
(If 20A, B, C, or E checked - Complete information on back of COE)

21. Residency Date / /

22. Qualifying Activity:

SECTION IV: PARENT/INTERVIEWER STATEMENT

23. The rules for migrant eligibility, services, student record transfer, and the Family Educational Rights and Privacy Act (FERPA) have been explained to me. I hereby authorize this school district and the State Educational Agency to release, transfer, and/or receive my child's education and health records, including immunization records and standardized test results, to/from other school districts, educational agencies, and other pertinent agencies. In order to potentially qualify for more educational, health, or social services, I further consent that student/family information, otherwise confidential under the provisions of FERPA, may be shared with organizations that provide services under the auspices of the following: the projects of the State Migrant Education Program (MEP), the College Assistance Migrant Program (CAMP), the High School Equivalency Program (HEP), the Migrant Education Even Start Program (MEES), child nutrition programs.

24. _____ _____/_____/_____
Parent/Guardian/Child Signature Date

I certify that these students are eligible for MEP services based on the information provided herein. Based on the interview, I have determined that the qualifying work is an important part of providing a living for the worker and his/her family in accordance with the Principal Means of Livelihood (PMOL) requirement. I hereby certify that, to the best of my knowledge, the information is true, reliable, and valid.

25. The above information was obtained from the: ☐ Parent ☐ Guardian ☐ Child and is correct to the best of my knowledge

_____ / / 26. _____ / /
Interviewer's Signature Date Reviewer's Initials Date

28. ☐ Principle Means of Livelihood
29. ☐ Intent Only
If 28 or 29 checked, complete back of COE.

30. Comments:

SECTION V: CERTIFICATION - SEA USE ONLY

27. I certify that based upon the above information and applicable definitions, the child(ren) listed is/are eligible for the Migrant Education Program.

1. _____ 2. _____
Lead Reviewer Signature Approval Signature