



MIGRANT EDUCATION PROGRAM ESSA CHILD ELIGIBILITY RE-INTERVIEW QUESTIONNAIRE

DEPARTMENT OF PUBLIC INSTRUCTION
STUDENT SUPPORT & INNOVATION DIVISION
SFN 58810 (04/2018)

RETURN TO:
Office of Indian/Multicultural Education
600 East Boulevard Avenue, Dept. 201
Bismarck, ND 58501-0440
Fax (701) 328-0203

Child/Student Information

Last Name	First Name	Birth Date		
Parent 1	Parent 2	Telephone Number		
Address	City	State	ZIP Code	Grade Level

Family & Child Data

MSIX ID	COE Original Interviewer	Re-Interviewer
Person Who Signed the COE		

Person(s) Interviewed (Try to interview the person who signed the COE first)

Date of Interview	City of Interview	Language(s) of Interview	District Number
Interviewee Name	Relationship to Child/Student		
Interviewee Name	Relationship to Child/Student		
Qualifying Worker	Relationship to Child/Student		

Date of Attempt #1	Time	By Telephone	Home Visit	Declined Interview
Notes				
Date of Attempt #2	Time	By Telephone	Home Visit	Declined Interview
Notes				
Date of Attempt #3	Time	By Telephone	Home Visit	Declined Interview
Notes				

Introduce yourself to the parent or guardian...

The purpose of our visit is to ask you a few questions that will be used to improve the Migrant Education Program (MEP) in North Dakota and to check our system, not to check on individual families. However, to make sure that children are receiving the correct services, children who are found to be ineligible for the Migrant Education Program may be removed from the migrant education program. Your family was randomly selected for this interview. May we visit with you?

*Do not leave **ANY** part of the questionnaire blank. If the person does not wish to respond to a particular question, note **DID NOT RESPOND** in the space provided.*

Qualifying Move or Work and Comments

1. Was the child/student listed above served by the Migrant Education Program in a school district or summer program? (check all that apply)		
<input type="checkbox"/> Yes – Migrant and Seasonal Head Start (TVOC) <input type="checkbox"/> Yes – Summer Migrant Education Program <input type="checkbox"/> No – My child did not attend a Migrant Education Program (skip to #4)	<input type="checkbox"/> No – My child has a General Education Diploma GED or High School Diploma (HSD) (skip to #4) <div style="border: 1px solid black; padding: 2px; width: fit-content; margin-left: 20px;">Date GED or HSD Earned</div>	
Center	Site	School

2. Describe how you feel about the migrant educational services your child received			
2.1. Provide an example of what worked well			
2.2. Did the services meet his/her educational needs? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3. Describe suggestions for improvement for the Migrant Education Program			
4. Have you, or any immediate family members, moved within the past 3 years? <input type="checkbox"/> Yes, complete 4.1. – 4.3. <input type="checkbox"/> No, add details (if applicable):			
4.1. Date of Move (MM/DD/YYYY)	4.2. Worker Moved To (School District, City, State)		
4.3. Where did the worker move from? (School District, City, State)			
5. Did the child/student listed above move? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Moved With <input type="checkbox"/> Self <input type="checkbox"/> Other Person – Name:	To Join Date	
5.1. Child Moved To (School District, City, State)	5.2. Child Moved From (School District, City, State)	Age of Child at Time of Move	
6. Did somebody in your immediate family engage/work in agricultural work (example: planting, cultivating, harvesting or processing crops like sugar beets, beans, corn, dairy products, meats, fish, or livestock)? <input type="checkbox"/> Yes, complete section A <input type="checkbox"/> No, skip to section B			
A. Name of Person(s) Engaged/Worked	Type of Agricultural Work Completed <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary (continue to 7)		
B. If the worker was unable to engage/work in agricultural work, what was the reason?			
B.1. Were moves in the past related to looking for agricultural work? <input type="checkbox"/> Yes, list move(s) for QUALIFYING work below <input type="checkbox"/> No, skip to 7 (If yes, list previous moves for QUALIFYING work below)			
Move 1			
Type of Work	When	Moved From	Moved To
Work is <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary <input type="checkbox"/> Within 36 months of sign date on COE			
Move 2			
Type of Work	When	Moved From	Moved To
Work is <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary <input type="checkbox"/> Within 36 months of sign date on COE			
7. Was the move you made due to economic necessity? <input type="checkbox"/> Yes <input type="checkbox"/> No			
8. How long were you hired to work for? Start Date: _____ End Date: _____			
9. Who in the family moved? (Note to the re-interviewer: verify if all students mentioned, who are under 22 with no high school diploma, are listed on the COE. If they are not listed, why?)			

*Open a copy of the COE that you brought. Compare it with the re-interview information. Is the information the same? <input type="checkbox"/> Yes <input type="checkbox"/> No, discrepancies explained below	
List discrepancies (ask follow-up questions to determine why information is different)	

Thank you for your time. If you have any questions, or would like to contact us, please do not hesitate to do so (give contact information).

By signing this form, I am acknowledging that the information as obtained and documented from this interview is correct to the best of my knowledge.

Signature of Person Interviewed	Date
Signature of Person Interviewed	Date

This section to be completed by the Identification and Recruitment (ID&R) Data Coordinator:

Compare re-interview results with original COE information.			
1.	Is this the same child who was previously determined eligible?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.	Was the child under the age of 22 at the time of the move?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.	Was the child eligible to attend school at the time of the move (child did not have a HSD or GED)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4.	Was the worker engaged in qualifying work?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5.	Was the worker employed in seasonal or temporary work?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6.	Did the child make a qualifying move within 36 months of the original interview date?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7.	Did the child move with the worker or to join the worker within 12 months?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8.	Did the worker make a qualifying move within 36 months of the interview date?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
*If "no" was recorded on any question above, please explain below:			
Is the information the same on all four sections of the COE? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Which section(s) did not match? <input type="checkbox"/> I - Family Data <input type="checkbox"/> II - Child Data <input type="checkbox"/> III - Qualifying Move and Work <input type="checkbox"/> IV – Comments Explain:			
Eligibility <input type="checkbox"/> Eligible as documented on COE <input type="checkbox"/> Eligible with COE corrections required <input type="checkbox"/> Need more information to make determination (will follow up) <input type="checkbox"/> Not eligible			

Signature of ID&R Data Coordinator	Date
Signature of ID&R Administrator	Date