

## 2017-2018 Emergency Impact Aid Grant

## Parent Application for Emergency Impact Aid

The parent of the displaced student(s) submits this completed application directly to the school district within whose boundaries the private nonprofit school (PNP) where the student(s) are enrolled is located.

The district maintains all documentation locally, including the submitted PNP Certification for Emergency Impact Aid and Parent Application forms. The certifications are not submitted with the application. The district provides assurance on Part 1 of the grant application that it will maintain all PNP Certification for Emergency Impact Aid forms submitted by the PNPs within its boundaries and make the forms available as required for monitors and auditors. These application and certification forms may be validated by TEA.

## **Definition of "Displaced Student"**

As defined in the Bipartisan Budget Act of 2018, the term "displaced student" means a student who enrolled in an elementary school or secondary school (other than the school that the student was enrolled in, or was eligible to be enrolled in, on the date that is one week prior to the date that the major disaster or emergency was declared for the area) because such student resides or resided on the date that is one week prior to the date that the major disaster or emergency declared by the President in accordance with section 401 or 501, respectively, of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5170), related to a covered disaster or emergency.

Parent or Guardian Information

Name	Phone	Email	
Address/P.O.	City	County	ZIP
PNP School Information			
Name	Phone	Email	
Address	City	County	ZIP
Displaced Student Information			
List the names of your children who w	vere enrolled at this PNP prior to Februar	ry 0 2018 as a result of	being displaced from

List the names of your children who were enrolled at this PNP prior to February 9, 2018, as a result of being displaced from their home campus as a result of a qualifying disaster.

1.	5.		
2.	6.		
3.	7.		
4.	8.		
Local School District Information			
Name of the district where the PNP is physically located			

## **Parent Certification**

I request that the local educational agency named above make payments to Emergency Impact Aid Accounts on behalf of each of my children named above.

I certify that I enrolled my children named above in this PNP prior to February 9, 2018 (the date of enactment of the law authorizing Emergency Impact Aid for Displaced Students).

I certify that my children named above, to the best of my knowledge and belief, were enrolled or were eligible to be enrolled in a school in an area for which the Federal Government later declared a major disaster or emergency related to Hurricanes Harvey, Irma, and Maria, or 2017 California wildfires and, as a result, are displaced students.

Parent/Guardian Name

Signature

Date