



# FAMILY ELIGIBILITY RE-INTERVIEW

SY 2025 - 2026

## PARENT/GUARDIAN RESPONSES

- |  |  |   |
|--|--|---|
| 1 <input type="checkbox"/> Eligible As COE Stands  | 2 <input type="checkbox"/> Eligible With Changes | 3 <input type="checkbox"/> Not Eligible             |
| 4 <input type="checkbox"/> Moved—Replaced With COE#: _____   | 5 <input type="checkbox"/> Family Not Available  | 6 <input type="checkbox"/> Family Refused Interview |
| <input type="checkbox"/> New QAD    RECRUITER ATTENDED RE-INTERVIEW <input type="checkbox"/> YES <input type="checkbox"/> NO |  |   |

### I. General Information

LEA: \_\_\_\_\_ Date of Eligibility Re-Interview: \_\_\_\_\_  
RT: \_\_\_\_\_ COE# Reviewed: \_\_\_\_\_  
Parent Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

### II. Eligibility Questions

- Have you or an immediate family member moved and engaged in agricultural or fishing work within the past 36 months? ☐ Yes ☐ No
- A) Did anyone else (ages 0-21) move with you? ☐ Yes ☐ No  
B) Did all your children move with you? ☐ Yes ☐ No
- What is the most recent date of your move where you engaged in employment? \_\_\_\_\_
- Who engaged in employment?  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_
- Where did you move **FROM**? City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_
- Where did you move **TO**? City: \_\_\_\_\_ State: \_\_\_\_\_
- What **SPECIFIC TYPE** of Agricultural/Fishing work did you engage in?  
Activity: \_\_\_\_\_ Crop: \_\_\_\_\_  
☐ **Wages**—fill out COE    ☐ **Sell**—fill out COE    ☐ **Personal Subsistence**—fill out "Personal Subsistence" questions below

#### Personal Subsistence Questions (only if "Personal Subsistence" is checked above)

- |  |  |
|--|--|
| 1) Is _____ for <b>recreational</b> purposes?  | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| 2) Is _____ for <b>cultural</b> or <b>traditional</b> purposes?                      | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| 3) Do you consume _____ as a substantial portion of your food intake?                | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| 4) Was the move to _____ to support your family?                                     | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| 5) Was the move to _____ a substantial part of your economic necessity?              | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| 6) Would it be a financial hardship for your family if you did not do this activity? | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| 7) How long have you been doing this activity? _____                                 | <input type="checkbox"/> Days    or <input type="checkbox"/> Weeks |
| 8) How many times a year do you move to _____?                                       |  |

### III. Move Information

Has the family moved due to economic necessity since September 2021 (or September of 2020 if reviewing a COE for the 2024-2025 School Year) and engaged in Temporary Employment or Seasonal Employment in Agricultural or Fishing related work? ☐ Yes ☐ No

**MOST RECENT MOVE**—Please list the most recent moves and name, birth date of the children who made the most recent qualifying move:

- The child(ren) listed on this form moved due to economic necessity **FROM** a residence in \_\_\_\_\_  
**TO** a residence in \_\_\_\_\_.
- The child(ren) moved (complete both a. and b.):
  - ☐ as the worker, OR    ☐ with the worker, OR    ☐ to join or precede the worker.
  - The worker, \_\_\_\_\_ is ☐ the child or the child's ☐ Parent/Guardian ☐ Spouse.
    - (Complete if "to join or precede" is checked in 2a.) The child(ren) moved on \_\_\_\_\_. The worker moved on \_\_\_\_\_.  
(provide comment)
- The Qualifying Arrival Date (QAD) was \_\_\_\_\_.

### III. Move Information—continued

4. The worker moved due to economic necessity on: \_\_\_\_\_, **from** a residence in \_\_\_\_\_  
to a residence in \_\_\_\_\_ and:
- a. ☐ engaged in new qualifying work soon after the move (provide comment if worker engaged more than 60 days after the move), OR
  - b. ☐ actively sought new qualifying work AND has a recent history of moves for qualifying work (provide comment)
5. The qualifying work,\* \_\_\_\_\_ was (make a selection in both a. and b.):
- a. ☐ seasonal, OR ☐ temporary employment
  - b. ☐ agricultural, OR ☐ fishing work
- \* If applicable check:  
☐ personal subsistence (provide comment)
6. (Complete if "temporary" is checked in #5a). The work was determined to be temporary employment based on:
- a. ☐ worker's statement (provide comment), OR
  - b. ☐ employer's statement (provide comment), OR
  - c. ☐ State documentation for \_\_\_\_\_.

### IV. Qualifying Children Information

List the children who made the qualifying move noted above.

Children(s) Name(s)	DOB

### V. General Comments

Include how qualifying activities are of an economic necessity for the family.

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### VI. Signature and Summary

*The information obtained and documented above is correct to the best of my knowledge.*

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Interviewer's Signature

\_\_\_\_\_  
Date

Summarize Findings: \_\_\_\_\_

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## FAMILY ELIGIBILITY RE-INTERVIEW

### School Year 2025 - 2026

### RESULTS

#### I. Family Information

Date of Eligibility Re-Interview:	
COE # Reviewed:	
Parent/Guardian:	

#### II. Results of Review

☐ Eligible As COE Stands

☐ Eligible With Changes

☐ Not Eligible (see reason below):

☐ Family did not make a qualifying move.

☐ Worker did not engage in qualifying work.

☐ Worker commuted.

☐ Child (ren) joined worker after 12 months.

☐ Child (ren) did not move with the worker.

☐ Other: \_\_\_\_\_  
\_\_\_\_\_

#### III. Questions or Appeal Process

If you have questions regarding this review or wish to appeal the results of the FERs, please contact Carlos D. González at [carlos.gonzalez@k12.wa.us](mailto:carlos.gonzalez@k12.wa.us) or 360-819-0991.

#### IV. Signature and Summary

\_\_\_\_\_  
Interviewee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
MEP Consultant Signature

\_\_\_\_\_  
Date



## RE-ENTREVISTA DE ELEGIBILIDAD FAMILIAR

### Año Escolar 2025 - 2026

### RESULTADOS

#### I. Información de la familia

Fecha de la Re-Entrevista de Elegibilidad:	
COE# Revisado:	
Padre/Tutor:	

#### II. Resultados de la Revisión

☐ Elegible tal como está el Certificado de Elegibilidad (COE-Inglés).

☐ Elegible con cambios.

☐ No elegible (ver la razón a continuación):

- ☐ La familia no se mudó para calificar.
- ☐ El trabajador no realizó en un trabajo de calificación.
- ☐ El trabajador viajó hacia y desde el trabajo.
- ☐ Niño(s) se unió al trabajador después de 12 meses.
- ☐ Niño(s) no se mudó con el trabajador.
- ☐ Otro: \_\_\_\_\_

#### III. Preguntas o proceso de apelación

Si tiene preguntas sobre esta revisión o desea apelar los resultados de la Revisión de Elegibilidad Familiar (FER), comuníquese con Carlos D. González, [carlos.gonzalez@k12.wa.us](mailto:carlos.gonzalez@k12.wa.us) o al 360-819-0991.

#### IV. Firma y Resumen

\_\_\_\_\_  
Firma del entrevistado

\_\_\_\_\_  
Fecha

\_\_\_\_\_  
Firma del Consultante del Programa de Educación Migrante (MEP-Inglés)

\_\_\_\_\_  
Fecha