Operation Military Kids Military Family Questionnaire

Quad City School Districts, in association with the US Army Garrison at the Rock Island Arsenal School Liaison Services office, are working to connect military families, schools, and communities.

If the child(ren) registering for school has/have any immediate family members (parent, sibling, guardian) serving in any branch of the military, or is a DoD Civilian or Contractor, please complete the following information. This information is being collected to help us better serve our families and make community connections through School Liaison Services, ACS, and family readiness.

Parents' names						
School Dis	trict:				100	
Child's Name		School			Grade	
Which family member is active military? mother father or specify						
Which branch of the m Air Force □ Marines □		ilitary? Army Navy	☐ Coast Guard		ard	
National G	uard unit?	(please specify v	•	•		
Yes 🗆	No 🗆	Branch:		Unit:		
Arsenal or	other Feder	a DoD Civilian o ally connected lar If yes, which on	ıd?			Island ractor
Is the f	amily memb	er currently deplo	yed c	verseas?	Yes □	No □