**Application: Shortfalls in federal impact aid**

*Eligibility: School districts impacted by shortfalls in federal impact aid for the education of children in families employed by the federal government on military reservations located within the town’s limits.*

School district Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Name of military installation or reservation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Total number of federally connected children  
  claimed for the 2018-2019 school year (from   
  table 6, line 3, of the district’s Application   
  for Impact Aid – Section 8003): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Total amount of Impact Aid owed in FY18 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Total amount of Impact Aid received in FY18 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Total amount of Impact Aid owed in FY19 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please submit a copy of your most recent impact aid application.

Contact person if further information is required:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Application submitted by: (superintendent of schools)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_/\_\_\_\_/2018

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name