

Please mark all the nights you spent away from home on the calendar including the day you left and the day you returned.

Parent/Guardian Information

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

Phone Number: \_\_\_\_\_

- Email a picture of your calendar to migrant\_office@asdk12.org
- Or, print and mail to:

Migrant Education 5530 East Northern Lights Blvd., Anchorage, AK 99504

Anchorage, AK 99504									Student Information (Please list ALL STUDENTS)							
Questions? Call 907-742-4275																
								Name:								
MAY 2024									Name:							
s	М	Т	w	TH	F	s	Location: Name:									
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Economic Statement:																