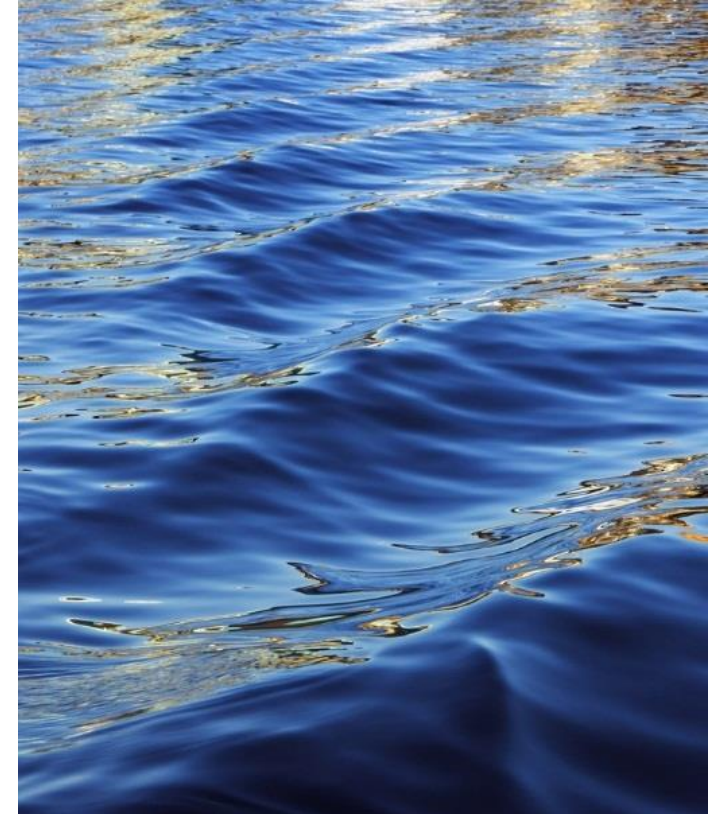




Florida's Re-Interview Documentation

FL ID&R Office
December 2020



Objectives

- Review key points regarding rolling re-interviews
- Improve understanding on how to accurately complete the 2020-2021 Florida Re-Interview Reporting Form
- Improve understanding on how to accurately complete the 2020-2021 Florida Re-interview Form

Florida Migrant Education Program
2020-21 Re-Interview Form

Re-Interview No.: _____

Student Full Name: (prepopulate) Qualifying Arrival Date: (prepopulate)
(Target QAD)

District: _____ DOB: _____ Grade: _____

Address: Same as COE Different from COE (include new address below)

<input type="checkbox"/> Attempt #1		<input type="checkbox"/> Attempt #2		<input type="checkbox"/> Attempt #3	
Date:	Time:	Date:	Time:	Date:	Time:
<input type="checkbox"/> Home/Made Contact		<input type="checkbox"/> Home/Made Contact		<input type="checkbox"/> Home/Made Contact	
<input type="checkbox"/> Declined Interview		<input type="checkbox"/> Declined Interview		<input type="checkbox"/> Declined Interview	
<input type="checkbox"/> No one home/No Answer		<input type="checkbox"/> No one home/No Answer		<input type="checkbox"/> No one home/No Answer	
<input type="checkbox"/> Moved away (select reason below)		<input type="checkbox"/> Phone Call		<input type="checkbox"/> Phone Call	

Moved Away New occupants in residence Neighbor indicated family moved
Indicate reason: Residence empty/abandoned Other:

Interviewer (print name): _____

Person Interviewed (print name): _____ (Check relationship to student)
 Father Mother Guardian Self
 Spouse Other:

COE Section III No. 4 = Established Worker Date (EWD): _____ (prepopulate)
*Date individual established him/herself as a migratory qualifying worker.

1. When and where was name of worker on COE living before moving here?
What type of work did he/she do? (Capture recent history of moves.)
¿Cuándo y dónde vivió el trabajador antes de mudarse hacia acá? ¿Qué tipo de trabajo hizo?
Move A – current move; Move B – move before A (if occurred); Move C – move before B (if occurred)
Enter the "From" and "To" location and the actual work. Do not write, "Moved for work."
If EWD is captured in Move A, do not complete Moves B and C.

When/Cuándo	From-To/Desde-Hacia	Work/Trabajo
Enter Move A Date: mm/dd/yy Is this within 30 days of the EWD? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Enter Move B Date: mm/dd/yy Is this within 30 days of the EWD? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Enter Move C Date: mm/dd/yy Is this within 30 days of the EWD? <input type="checkbox"/> Yes <input type="checkbox"/> No		

1a. If the EWD is not listed in question #1, ask for an explanation.

2. When the worker moved on the EWD, what type of work did he/she do or actively seek? Must ask #2a if "temporary" is checked. Agricultural OR Fishing
AND
 Seasonal OR Temporary
¿Cuándo se mudó el trabajador en el (EWD), que tipo de trabajo hizo o buscó activamente? (pregunta #2a si marca "temporary")

2a. When the employment first started, how long did the worker intend to work? If the employment has ended, how long did the work last? Must ask if "temporary" is checked in #2. Length of employment: _____
¿Cuándo empezó el trabajo, cuánto tiempo intentó trabajar?

1

FL MEP CONFIDENTIAL Revised 06/22/2020



Key points regarding rolling re-interviews



Rolling Re-interviews – Key Points

Re-Interviewing & Validating Migrant Families/Youth Eligibility

The purpose of the re-interview process is to **verify that a proper and timely eligibility determination** of a student and/or out-of-school youth (OSY) was made based on Florida Migrant Education Program (FMEP) regulations and guidance.

In Florida, Local Operating Agencies (LOAs) annually must carry out the task of re-interviewing* a **randomly selected sample of children** in an ongoing manner for the FMEP to be in compliance with federal regulations.

2020-2021 Florida ID&R Manual (page 63)

* Code of Federal Regulations Title 34 – Subtitle B – Chapter II – Part 200.89



Rolling Re-interviews – Key Points

Re-Interviewing Best Practice

- Rolling re-interviews should be conducted shortly after the eligibility interview was conducted and the new Certificate of Eligibility (COE) was completed to increase the likelihood that...
 - The child selected in the sample is still living in the district;
 - The interviewee will accurately remember relevant information; and
 - Any COE inaccuracies are identified and resolved promptly.
- Remember to review the FMEP ID&R Re-interview Protocol

<https://www.flrecruiter.org/files/FLMEP-Re-InterviewProtocol-Revised-FINAL-6-22-20.pdf>






2020-2021 Florida Re-interview Reporting Form



2020-2021 Re-Interview Reporting Form

- Ensure that you are using the correct form.



**Florida Migrant Education Program
Re-Interview Reporting Form**

District: _____ Form completed by: _____
 Date: _____ **Submit with each phase of rolling re-interviews**

NOTE – Random sample ONLY INCLUDES migrant children ages 3 to 21 years old with a NEW COE (date approved) from September 1, 2020, to August 31, 2021.

Dates the Re-interview were conducted: (Example - November 11-15, 2020)		
TARGET NUMBER OF COMPLETED RE-INTERVIEWS (How many re-interviews do you want to complete?)		
Main Random Sample size (Same amount as the TARGET NUMBER):		
How many from the Main Sample were re-interviewed: (Enter total number re-interviewed; indicate eligible/ineligible counts below)		
How many were found Eligible:		
How many were found Ineligible:		
How many from the Main Sample were not re-interviewed: (Enter total number <u>not</u> re-interviewed <u>and</u> give reason(s) below)		
Moved away:		
Not available:		
Declined to be re-interviewed:		
Alternate Random Sample size (Select sufficient alternates to help reach the TARGET NUMBER):		
How many of the Alternate Sample were re-interviewed: (Enter total number re-interviewed; indicate eligible/ineligible counts below)		
How many were found Eligible:		
How many were found Ineligible:		
How many from the Alternate Sample were not re-interviewed: (Enter total number <u>not</u> re-interviewed <u>and</u> give reason(s) below)		
Moved away:		
Not available:		
Declined to be re-interviewed:		
Not needed (already reached TARGET NUMBER):		


Please mail the Reporting Form, copies of the completed re-interview form and corresponding COEs to the ID&R Office (do not send by email).
FMEP ID&R Office, 10014 N. Dale Mabry Hwy. Suite 202, Tampa, FL 33618
 If you have any questions, please call the office at 866.963.6677.

FMEP FL ID&R Office

2020-2021 SY
Rev. 06/22/20

2020-2021 Re-Interview Reporting Form

- Ensure that you are using the correct form.
- The Local Operating Agency (LOA) should complete a Re-Interview Reporting Form with each phase of rolling re-interviews.



**Florida Migrant Education Program
Re-Interview Reporting Form**

District: _____ Form completed by: _____

Date: _____ **Submit with each phase of rolling re-interviews**

NOTE – Random sample ONLY INCLUDES migrant children ages 3 to 21 years old with a NEW COE (date approved) from September 1, 2020, to August 31, 2021.

Dates the Re-interview were conducted: (Example - November 11-15, 2020)		
TARGET NUMBER OF COMPLETED RE-INTERVIEWS (How many re-interviews do you want to complete?)		
Main Random Sample size (Same amount as the TARGET NUMBER):		
How many from the Main Sample were re-interviewed: (Enter total number re-interviewed; indicate eligible/ineligible counts below)		
How many were found Eligible:		
How many were found Ineligible:		
How many from the Main Sample were not re-interviewed: (Enter total number <u>not</u> re-interviewed <u>and</u> give reason(s) below)		
Moved away:		
Not available:		
Declined to be re-interviewed:		
Alternate Random Sample size (Select sufficient alternates to help reach the TARGET NUMBER):		
How many of the Alternate Sample were re-interviewed: (Enter total number re-interviewed; indicate eligible/ineligible counts below)		
How many were found Eligible:		
How many were found Ineligible:		
How many from the Alternate Sample were not re-interviewed: (Enter total number <u>not</u> re-interviewed <u>and</u> give reason(s) below)		
Moved away:		
Not available:		
Declined to be re-interviewed:		
Not needed (already reached TARGET NUMBER):		


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FMEP FL ID&R Office

2020-2021 SY
Rev. 06/22/20

2020-2021 Re-Interview Reporting Form

- Ensure that you are using the correct form.
- The Local Operating Agency (LOA) should complete a Re-Interview Reporting Form with each phase of rolling re-interviews.
- The random re-interview sample should ONLY INCLUDE COEs that were approved from September 1, 2020, to August 31, 2021.



**Florida Migrant Education Program
Re-Interview Reporting Form**

District: _____ Form completed by: _____
 Date: _____ **Submit with each phase of rolling re-interviews**

NOTE – Random sample ONLY INCLUDES migrant children ages 3 to 21 years old with a NEW COE (date approved) from September 1, 2020, to August 31, 2021.

Dates the Re-interview were conducted: _____

SECTION VI: ELIGIBILITY DATA CERTIFICATION

I certify that based on the information provided to me, which in all relevant aspects is reflected above, I am satisfied that these children are migratory children as defined in 20 U.S.C. 6399(2) and implementing regulations, and thus eligible as such for MEP services. I hereby certify that, to the best of my knowledge, the information is true, reliable, and valid and I understand that any false statement provided herein that I have made is subject to fine or imprisonment pursuant to 18 U.S.C. 1001.

Recruiter Signature _____ 08/02/20
 Signature of Interviewer _____ Date _____
SEA Reviewer Signature _____ 09/01/20
 Signature of Designated SEA Reviewer _____ Date _____


Alternate Random Sample size (Select sufficient alternates to help reach the TARGET NUMBER):	
How many of the Alternate Sample were re-interviewed: (Enter total number re-interviewed; indicate eligible/ineligible counts below)	
How many were found Eligible:	
How many were found Ineligible:	
How many from the Alternate Sample were not re-interviewed: (Enter total number <u>not</u> re-interviewed <u>and</u> give reason(s) below)	
Moved away:	
Not available:	
Declined to be re-interviewed:	
Not needed (already reached TARGET NUMBER):	

Please mail the Reporting Form, copies of the completed re-interview forms, and corresponding COEs to the ID&R Office (do not send by email).
FMEP ID&R Office, 10014 N. Dale Mabry Hwy. Suite 202, Tampa, FL 33618
 If you have any questions, please call the office at 866.963.6677.

2020-2021 Re-Interview Reporting Form

- Ensure that you are using the correct form.
- The Local Operating Agency (LOA) should complete a Re-Interview Reporting Form with each phase of rolling re-interviews.
- The random re-interview sample should ONLY INCLUDE COEs that were approved from September 1, 2020, to August 31, 2021.
- Date range Re-interview was conducted – The LOA should enter the start and end date for the rolling re-interview.

Example: November 11-15, 2020.



**Florida Migrant Education Program
Re-Interview Reporting Form**

District: _____ Form completed by: _____
 Date: _____ **Submit with each phase of rolling re-interviews**

NOTE – Random sample ONLY INCLUDES migrant children ages 3 to 21 years old with a NEW COE (date approved) from September 1, 2020, to August 31, 2021.

Dates the Re-interview were conducted: (Example - November 11-15, 2020)	
TARGET NUMBER OF COMPLETED RE-INTERVIEWS (How many re-interviews do you want to complete?)	
Main Random Sample size (Same amount as the TARGET NUMBER):	
How many from the Main Sample were re-interviewed: (Enter total number re-interviewed; indicate eligible/ineligible counts below)	
How many were found Eligible:	
How many were found Ineligible:	
How many from the Main Sample were not re-interviewed: (Enter total number <u>not</u> re-interviewed <u>and</u> give reason(s) below)	
Moved away:	
Not available:	
Declined to be re-interviewed:	
Alternate Random Sample size (Select sufficient alternates to help reach the TARGET NUMBER):	
How many of the Alternate Sample were re-interviewed: (Enter total number re-interviewed; indicate eligible/ineligible counts below)	
How many were found Eligible:	
How many were found Ineligible:	
How many from the Alternate Sample were not re-interviewed: (Enter total number <u>not</u> re-interviewed <u>and</u> give reason(s) below)	
Moved away:	
Not available:	
Declined to be re-interviewed:	
Not needed (already reached TARGET NUMBER):	

Please mail the Reporting Form, copies of the completed re-interview forms, and corresponding COEs to the ID&R Office (do not send by email).
FMEP ID&R Office, 10014 N. Dale Mabry Hwy. Suite 202, Tampa, FL 33618
 If you have any questions, please call the office at 866.963.6677.

FMEP FL ID&R Office

2020-2021 SY
Rev. 06/22/20

2020-2021 Re-Interview Reporting Form

Important Reminders:

- The re-interview reporting form is due within 30 days of each phase of rolling re-interviews.
- Along with the re-interview form, districts should submit a copy of the original COE and a copy of the corrected COE when *Eligible with corrections on a COE required* is checked.



Florida Migrant Education Program Re-Interview Reporting Form

Re-Interview Reporting Form Instructions

- The Local Operating Agency (LOA) shall complete a Re-interview Reporting Form at the end of each phase of rolling re-interviews. Therefore, the LOA may complete the reporting form more than once during the performance period.
- Date range Re-interview was conducted – The LOA should enter the start and end date for the rolling re-interview.
- The Target Number represents the total number of re-interviews the LOA planned to complete.
- Reminder – The Main Sample (MS) size has to be the same amount as the Target Number. Enter that number.
 - Enter how many in the MS were re-interviewed and indicate how many of these were found eligible and ineligible.
 - Enter how many in the MS were not found. Of this number, indicate how many moved away, were not available (after multiple attempts), and how many declined to be re-interviewed.
 - MS re-interviewed + MS not re-interviewed = MS size AND = Target Number
- Reminder – The Alternate Sample (AS) should be of sufficient size to help reach the Target Number. Enter that number.
 - Enter how many in the AS were re-interviewed and indicate how many of these were found eligible and ineligible.
 - Enter how many in the AS were not found. Of this number, indicate how many moved away, were not available (after multiple attempts), and how many declined to be re-interviewed.
 - Enter how many in the AS were not needed because the Target Number was reached.
 - AS re-interviewed + AS not re-interviewed = AS size
- Total MS re-interviewed + Total AS re-interviewed = Target Number
- Within 30 days of each phase of rolling re-interviews, the LOA shall mail the following documents to the ID&R Office. Please submit copies – LOAs should maintain the originals.
 - A copy of the Re-interview Reporting Form (refer to next section)
 - Copies of the completed re-interview forms and the forms for re-interviews that were attempted but contact was not made with the sample.
 - Copies of each corresponding Certificate of Eligibility (COE).
 - NOTE - The LOA should submit a copy of the original COE and a copy of the corrected COE when *Eligible with corrections on COE required* is checked.
- All forms must be submitted no later than September 1st of each year.
- It is not necessary to include the forms and COEs for any AS that was not used in the re-interview because the target number of COEs was reached.



2020-2021 Florida Re-interview Form



2020-2021 Re-Interview Form



**Florida Migrant Education Program
2020-21 Re-Interview Form**

Re-Interview No.: _____

Important reminders:

- Certain sections of the re-interview form may be prepopulated.
 - Information that can be prepopulated will be displayed in **GREEN** boxes throughout this training.
- Ensure that the person that conducts the re-interview:
 - Is not the person who completed the COE.
 - Is not the person that prepopulates the information on the re-interview form.
 - Does not review the original COE until the end of the re-interview.

2020-2021 Re-Interview Form



Florida Migrant Education Program
2020-21 Re-Interview Form

Re-Interview No.: M-001

Top of the Re-Interview Form

- Ensure that you are using the correct Re-Interview form.
- Ensure each sample is assigned a unique re-interview number.
 - **include the letter 'M'** for main sample **or the letter 'A'** for alternate sample in your re-interview number.

2020-2021 Re-Interview Form



Florida Migrant Education Program
2020-21 Re-Interview Form

Re-Interview No.: A-001

Top of the Re-Interview Form

- Ensure that you are using the correct Re-Interview form.
- Ensure each sample is assigned a unique re-interview number.
 - **include the letter 'M'** for main sample **or the letter 'A'** for alternate sample in your re-interview number.

2020-2021 Re-Interview Form

Student Full Name: (prepopulate)		Qualifying Arrival Date: (prepopulate) (Target QAD)	
District:	DOB:	Grade:	
Address: <input type="checkbox"/> Same as COE <input type="checkbox"/> Different from COE (include new address below)			

- **Student Full Name:** Include the student's full name as shown in Section II: Child Data on the COE.
- **Qualifying Arrival Date:** Include the Target QAD as shown in Section III, #3 of the COE.
- **DOB:** Enter using **MM/DD/YY** format.
- **Grade:** Enter the grade the child is currently in.

Ensure there are no blank spaces.

2020-2021 Re-Interview Form

<input type="checkbox"/> Attempt #1		<input type="checkbox"/> Attempt #2		<input type="checkbox"/> Attempt #3	
Date:	Time:	Date:	Time:	Date:	Time:
<input type="checkbox"/> Home/Made Contact		<input type="checkbox"/> Home/Made Contact		<input type="checkbox"/> Home/Made Contact	
<input type="checkbox"/> Declined Interview		<input type="checkbox"/> Declined Interview		<input type="checkbox"/> Declined Interview	
<input type="checkbox"/> No one home/No Answer		<input type="checkbox"/> No one home/No Answer		<input type="checkbox"/> No one home/No Answer	
<input type="checkbox"/> Moved away (select reason below)		<input type="checkbox"/> Phone Call		<input type="checkbox"/> Phone Call	
Moved Away		<input type="checkbox"/> New occupants in residence		<input type="checkbox"/> Neighbor indicated family moved	
Indicate reason:		<input type="checkbox"/> Residence empty/abandoned		<input type="checkbox"/> Other:	

- **Attempts:** Enter up to three attempts to contact the family and whether they were:
 - Home/Made Contact
 - Declined Interview
 - No one home/No Answer
 - Moved away (select reason below)
 - New occupants in residence, neighbor indicated family moved, residence is empty/abandoned, or other.

Due to the COVID-19 Protocol, re-interviews may be conducted over the phone.

2020-2021 Re-Interview Form

Interviewer (print name):

**Person
Interviewed (print name):**

(Check relationship to student)

Father Mother Guardian Self
 Spouse Other:

- **Interviewer:** Enter the name of the individual completing the re-interview.
- **Person Interviewed:** Enter the name of the individual who is being interviewed. Ensure that you check the relationship of this individual to the student.
- The person interviewed should be knowledgeable of the moves.
 - As a best practice the person interviewed should be the same person interviewed when the COE was completed.

2020-2021 Re-Interview Form

Important Reminders:

- Questions 1-3 are all documenting the information pertaining to the migratory qualifying worker.
- This information should match the information listed in #4-#6 in Section III of the COE.

<p align="center">COE Section III No. 4 = Established Worker Date (EWD): _____ (prepopulate) *Date individual established him/herself as a migratory qualifying worker.</p>		
<p>1. When and where was <u>name of worker on COE</u> living before moving here? What type of work did he/she do? (Capture recent history of moves.) <i>¿Cuándo y dónde vivió el trabajador antes de mudarse hacia acá? ¿Qué tipo de trabajo hizo?</i></p> <p>Move A – current move; Move B – move before A (if occurred); Move C – move before B (if occurred) Enter the "From" and "To" location and the actual work. Do not write, "Moved for work." If EWD is captured in Move A, do not complete Moves B and C.</p>		
When/Cuándo	From-To/Desde-Hacia	Work/Trabajo
<p>Enter Move A Date: <u>mm/dd/yy</u> Is this within 30 days of the EWD? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>Enter Move B Date: <u>mm/dd/yy</u> Is this within 30 days of the EWD? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>Enter Move C Date: <u>mm/dd/yy</u> Is this within 30 days of the EWD? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>1a. If the EWD is not listed in question #1, ask for an explanation.</p>		
<p>2. When the worker moved on the EWD, what type of work did he/she do or actively seek? <u>Must ask #2a if "temporary" is checked.</u> <i>¿Cuándo se mudó el trabajador en el (EWD), que tipo de trabajo hizo o buscó activamente? (pregunta #2a si marca "temporary")</i></p>		<p><input type="checkbox"/> Agricultural <i>OR</i> <input type="checkbox"/> Fishing AND <input type="checkbox"/> Seasonal <i>OR</i> <input type="checkbox"/> Temporary</p>
<p>2a. When the employment first started, how long did the worker intend to work? If the employment has ended, how long did the work last? <u>Must ask if "temporary" is checked in #2.</u> <i>Cuando empezó el trabajo, ¿cuánto tiempo intentó trabajar?</i></p>		<p>Length of employment: _____</p>
<p>3. Did the worker move due to economic necessity, from one residence to another, and across school district lines on the EWD? <i>¿El trabajador se mudó debido a necesidades económicas, de una residencia, y cruzando distritos escolares en el (EWD)?</i></p>		<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

2020-2021 Re-Interview Form

COE Section III No. 4 = Established Worker Date (EWD): 09/21/18 (prepopulate)

*Date individual established him/herself as a migratory qualifying worker.

1. **When and where was** name of worker on COE **living before moving here?**

What type of work did he/she do? (Capture recent history of moves.)

¿Cuándo y dónde vivió el trabajador antes de mudarse hacia acá? ¿Qué tipo de trabajo hizo?

Move A – current move; Move B – move before A (if occurred); Move C – move before B (if occurred)

Enter the "From" and "To" location and the actual work. Do not write, "Moved for work."

If EWD is captured in Move A, do not complete Moves B and C.

When/ <i>Cuándo</i>	From-To/ <i>Desde-Hacia</i>	Work/ <i>Trabajo</i>
Enter Move A Date: <u>mm/dd/yy</u> Is this within 30 days of the EWD? <input type="checkbox"/> Yes <input type="checkbox"/> No		

- **Established Worker Date:** Enter the date the individual established him/herself as a migratory qualifying worker in Section III, #4 of the COE.

SECTION III: QUALIFYING MOVES & WORK

4. The worker moved due to economic necessity on 09/21/18 from a residence in Pulaski / Winamac / IN / USA to a residence in Hillsborough / Tampa / FL

- 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)

2020-2021 Re-Interview Form

COE Section III No. 4 = Established Worker Date (EWD): _____ (prepopulate)

*Date individual established him/herself as a migratory qualifying worker.

1. **When and where was** *Jose Luis Martinez* **living before moving here?**

What type of work did he/she do? (Capture recent history of moves.)

¿Cuándo y dónde vivió el trabajador antes de mudarse hacia acá? ¿Qué tipo de trabajo hizo?

Move A – current move; Move B – move before A (if occurred); Move C – move before B (if occurred)

Enter the "From" and "To" location and the actual work. Do not write, "Moved for work."

If EWD is captured in Move A, do not complete Moves B and C.

When/ <i>Cuándo</i>	From-To/ <i>Desde-Hacia</i>	Work/ <i>Trabajo</i>
Enter Move A Date: <u>mm/dd/yy</u> Is this within 30 days of the EWD? <input type="checkbox"/> Yes <input type="checkbox"/> No		

- **Name of Established Worker:** Enter the name of the individual who was listed in Section III, #2b of the COE. Ensure that the name matches the name on the COE.

SECTION III: QUALIFYING MOVES & WORK
2. The child(ren) moved (complete both a. and b.): a. <input type="checkbox"/> as the worker <input checked="" type="checkbox"/> with the worker, OR <input type="checkbox"/> to join or precede the worker. b. The worker, <i>Jose Luis Martinez</i> , is <input type="checkbox"/> the child or the child's <input checked="" type="checkbox"/> parent/guardian <input type="checkbox"/> spouse i. (Complete if "to join or precede" is checked in 2a.) (The child(ren) moved on <u>MM/DD/YY</u> The worker moved on <u>MM/DD/YY</u> Provide comment.

2020-2021 Re-Interview Form

COE Section III No. 4 = Established Worker Date (EWD): _____ (prepopulate)

*Date individual established him/herself as a migratory qualifying worker.

1. **When and where was** name of worker on COE **living before moving here?**

What type of work did he/she do? (Capture recent history of moves.)

¿Cuándo y dónde vivió el trabajador antes de mudarse hacia acá? ¿Qué tipo de trabajo hizo?

Move A – current move; Move B – move before A (if occurred); Move C – move before B (if occurred)

Enter the “From” and “To” location and the actual work. Do not write, “Moved for work.”

If EWD is captured in Move A, do not complete Moves B and C.

When/ <i>Cuándo</i>	From-To/ <i>Desde-Hacia</i>	Work/ <i>Trabajo</i>
Enter Move A Date: <u>mm/dd/yy</u>		
Is this within 30 days of the EWD? <input type="checkbox"/> Yes <input type="checkbox"/> No		

- **#1 - Where was the worker living before moving here?:** Move A – current move; Move B – move before A (if occurred); Move C – move before B (if occurred).
- **Move Dates:** Enter the date, the “From” and “To” locations, and what type of work was done at these locations. Make sure to include the city and state, and the work that was done soon after the move. **DO NOT** document activities done after the first 60 days.
- Make sure to check whether the move is within 30 days of the EWD located at the top.

2020-2021 Re-Interview Form

COE Section III No. 4 = Established Worker Date (EWD): _____ (prepopulate)

*Date individual established him/herself as a migratory qualifying worker.

1. **When and where was** name of worker on COE **living before moving here?**

What type of work did he/she do? (Capture recent history of moves.)

¿Cuándo y dónde vivió el trabajador antes de mudarse hacia acá? ¿Qué tipo de trabajo hizo?

Move A – current move; Move B – move before A (if occurred); Move C – move before B (if occurred)

Enter the "From" and "To" location and the actual work. Do not write, "Moved for work."

If EWD is captured in Move A, do not complete Moves B and C.

When/Cuándo	From-To/Desde-Hacia	Work/Trabajo
Enter Move A Date: <u>mm/dd/yy</u> Is this within 30 days of the EWD? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	FROM: <i>Plant City, Florida</i> TO: <i>Palmetto, Florida</i>	<i>Construction</i>
Enter Move B Date: <u>mm/dd/yy</u> Is this within 30 days of the EWD? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	FROM: <i>Murrieta, Georgia</i> TO: <i>Plant City, Florida</i>	<i>Car manufacturing</i>
Enter Move C Date: <u>mm/dd/yy</u> Is this within 30 days of the EWD? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	FROM: <i>Valdosta, Georgia</i> TO: <i>Murrieta, Georgia</i>	<i>Construction</i>

1a. **If the EWD is not listed in question #1, ask for an explanation.**

Get clarification on moves to ensure no one in the home has made the move.

2020-2021 Re-Interview Form Example

COE Section III No. 4 = Established Worker Date (EWD): 09/21/18 (prepopulate)

*Date individual established him/herself as a migratory qualifying worker.

1. When and where was Jose Luis Martinez living before moving here?

What type of work did he/she do? (Capture recent history of moves.)

¿Cuándo y dónde vivió el trabajador antes de mudarse hacia acá? ¿Qué tipo de trabajo hizo?

Move A – current move; Move B – move before A (if occurred); Move C – move before B (if occurred)

Enter the "From" and "To" location and the actual work. Do not write, "Moved for work."

If EWD is captured in Move A, do not complete Moves B and C.

When/Cuándo	From-To/Desde-Hacia	Work/Trabajo
Enter Move A Date: <u>09/11/20</u> Is this within 30 days of the EWD? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	FROM: <u>Plant City, Florida</u> TO: <u>Palmetto, Florida</u>	<u>Picking strawberries</u>
Enter Move B Date: <u>10/01/19</u> Is this within 30 days of the EWD? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	FROM: <u>Murrieta, Georgia</u> TO: <u>Plant City, Florida</u>	<u>Cleaning offices</u>
Enter Move C Date: <u>09/21/18</u> Is this within 30 days of the EWD? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	FROM: <u>Valdosta, Georgia</u> TO: <u>Murrieta, Georgia</u>	<u>Picking watermelon</u>

- If EWD is captured in Move A, **do not** complete Moves B and C.

2020-2021 Re-Interview Form

2. **When the worker moved on the EWD, what type of work did he/she do or actively seek?** Must ask #2a if "temporary" is checked.

¿Cuándo se mudó el trabajador en el (EWD), que tipo de trabajo hizo o buscó activamente? (pregunta #2a si marca "temporary")

Agricultural OR Fishing
AND
 Seasonal OR Temporary

2a. **When the employment first started, how long did the worker intend to work? If the employment has ended, how long did the work last?**

Must ask if "temporary" is checked in #2.

Quando empezó el trabajo, ¿cuánto tiempo intentó trabajar?

Length of employment:

8 months

- **#2:** Enter if the work engaged in/actively sought is agricultural or fishing, and seasonal or temporary.
- **#2a:** If temporary was marked in #2, then enter the length of the temporary employment.

SECTION III: QUALIFYING MOVES & WORK

5. The qualifying work,* cutting fern 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 _____.

2020-2021 Re-Interview Form

3. **Did the worker move due to economic necessity, from one residence to another, and across school district lines on the EWD?**

¿El trabajador se mudó debido a necesidades económicas, de una residencia, y cruzando distritos escolares en el (EWD)?

Yes No

- **#3:** Document if the worker made a qualifying move, i.e., due to economic necessity, from one residence to another, and across school district lines on the EWD.

2020-2021 Re-Interview Form

Important Reminders

- Questions 4 -7 are all documenting the information pertaining to the migratory child.
- This information should match the information listed in #1-#3 in Section III, of the COE.

<p>4. Did <u>name of the child</u> move due to economic necessity, from one residence to another, and across school district lines on the Target QAD? <i>¿El niño/niña se mudó debido a necesidades económicas, de una residencia a otra, y cruzando distritos escolares?</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>5. Did the child last move <input type="checkbox"/> AS <input type="checkbox"/> WITH <input type="checkbox"/> TO-JOIN or PRECEDE the worker? (Enter the Date the Child Moved and the From and To City, St.) <i>¿Se mudó el niño/la niña como, junto con, para unirse con o antes del trabajador? En qué fecha? ¿De dónde? ¿Hacia dónde?</i></p>	<p>Date the child moved: <u>MM/DD/YY</u> From: To:</p>
<p>6. List full names and ages (at time of move) of <u>ONLY</u> the children who made the move on Target QAD. <i>¿Cuáles son los nombres y las edades de <u>SOLO</u> los niños que hicieron la movida/mudanza en (Target QAD)?</i></p>	
<p>7. Have any of the children who made this move graduated from high school or obtained an HSED (or GED) in the U.S.? If yes, when did they graduate? <i>¿Se han graduado de la escuela superior o han obtenido un diploma de equivalencia (GED) en EE.UU. algunos de los niños que hicieron la mudada? ¿Si? ¿Cuándo?</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when (MM/YY) _____</p>

2020-2021 Re-Interview Form

4. Did Maria Paulina Limon move due to economic necessity, from one residence to another, and across school district lines on the Target QAD?
 ¿El niño/niña se mudó debido a necesidades económicas, de una residencia a otra, y cruzando distritos escolares?

Yes No

- **#4:** Enter the child's full name. This name should match the name documented in Section II, Child Data of the COE.

SECTION II: CHILD DATA

1. Last Name 1	2. Last Name 2	3. First Name	4. Middle Name	5. Suffix	6. Sex	7. Birth Date MM/DD/YY	8. Age	9. MB	10. Code	11. Birth Place City State Country	12. School	13. Gr.
1. <i>Limon</i>	<i>----</i>	<i>Maria</i>	<i>Paulina</i>	<i>-</i>	<i>F</i>	<i>01/01/0119</i>	<i>-</i>	<i>07</i>	<i>Indio, CA USA</i>	<i>99995</i>	<i>12</i>	
2.												
3.												
4.												
5.												

14. Child/Family Data Comments (e.g., MSIX IDs, urgent health, non-eligible children in the household, additional phone number(s), email address) DO NOT USE SPACE TO ENTER ELIGIBILITY INFORMATION

2020-2021 Re-Interview Form

4. Did Maria Paulina Limon move due to economic necessity, from one residence to another, and across school district lines on the Target QAD?

¿El niño/niña se mudó debido a necesidades económicas, de una residencia a otra, y cruzando distritos escolares?

Yes No

- **#4:** Document if the child made a qualifying move on the Target QAD, listed in Section III, #3 of the COE.

SECTION III: QUALIFYING MOVES & WORK

3. The Qualifying Arrival Date was _____ MM/DD/YY

2020-2021 Re-Interview Form

5. **Did the child last move** AS WITH TO-JOIN or PRECEDE the worker?

(Enter the Date the Child Moved and the From and To City, St.)

*¿Se mudó el niño/la niña como, junto con, para unirse con o antes del trabajador?
En qué fecha? ¿De dónde? ¿Hacia dónde?*

Date the child moved:

09/11/20

From: Plant City, FL

To: Palmetto, FL

- **#5:** Document if the child made the move as, with, to join or precede the migratory qualifying worker and enter the date and the city and state for both “from” and “to”.
- This information should match the information in Section III, #1-#3 of the COE.
- The date the child moved can be within 30 days of the date in Section III, of the COE.

SECTION III: QUALIFYING MOVES & WORK

1. The child(ren) listed on this form moved due to economic necessity from a residence in Hillsborough / Plant City / FL / USA to a residence in Manatee / Palmetto / FL

2. The child(ren) moved (complete both a. and b.):

a. as the worker, OR with the worker, OR to join or precede the worker.

b. The worker, Jose Luis Martinez is the child or the child's parent/guardian spouse.

i. (Complete if “to join or precede” is checked in #2a.) The child(ren) moved on _____.

The worker moved on _____. (provide comment)

3. The Qualifying Arrival Date was 09/11/20.

2020-2021 Re-Interview Form

6. List full names and ages (at time of move) of **ONLY** the children who made the move on Target QAD.
¿Cuáles son los nombres y las edades de SOLO los niños que hicieron la movida/mudanza en (Target QAD)?

- #6:** Document the names and ages of **all the eligible children** who made the move on the Target QAD. Do not include children who did not make the move on the Target QAD.

SECTION II: CHILD DATA												
1. Last Name 1	2. Last Name 2	3. First Name	4. Middle Name	5. Suffix	6. Sex	7. Birth Date MM/DD/YY	8. Age	9. MB	10. Code	11. Birth Place City State Country	12. School	13. Gr.
1. <i>Limon</i>	<i>----</i>	<i>Maria</i>	<i>Paulina</i>	<i>-</i>	<i>F</i>	<i>01/01/0119</i>	<i>-</i>	<i>07</i>		<i>Indio, CA USA</i>	<i>99995</i>	<i>12</i>
2.												
3.												
4.												
5.												
14. Child/Family Data Comments (e.g., MSIX IDs, urgent health, non-eligible children in the household, additional phone number(s), email address) DO NOT USE SPACE TO ENTER ELIGIBILITY INFORMATION												

2020-2021 Re-Interview Form

6. List full names and ages (at time of move) of **ONLY** the children who made the move on Target QAD.
¿Cuáles son los nombres y las edades de SOLO los niños que hicieron la movida/mudanza en (Target QAD)?

- **#6:** Document the names and ages of **all the eligible children** who made the move on the Target QAD. Do not include children who did not make the move on the Target QAD.

To Join Moves

SECTION III: QUALIFYING MOVES & WORK

2. The child(ren) moved (complete both a. and b.):

a. as the worker with the worker, OR to join or precede the worker.

b. The worker, Jose Luis Martinez, is the child or the child's parent/guardian spouse

i. (Complete if "to join or precede" is checked in 2a.) (The child(ren) moved on 07/30/18)

The worker moved on 09/21/18 Provide comment.

3. The Qualifying Arrival Date was 09/21/18

2020-2021 Re-Interview Form

7. **Have any of the children who made this move graduated from high school or obtained an HSED (or GED) in the U.S.? If yes, when did they graduate?**

¿Se han graduado de la escuela superior o han obtenido un diploma de equivalencia (GED) en EE.UU. algunos de los niños que hicieron la mudada? ¿Si? ¿Cuándo?

Yes No

If yes, when (MM/YY)

05/20

- **#7:** Document if any of the eligible children have graduated from high school or obtained a GED in the U.S. and the month and year they graduated.

2020-2021 Re-Interview Form

8. Re-interviewer Notes – Use this space to provide explanations if needed.

- If the response to #3 and/or #4 is “no”, ask for an explanation.
- If date in #5 does not match the Target QAD, ask for an explanation.
- If any child listed in #6 is not listed on the COE, provide a clarification.

9. Optional Notes – May be used if more space is needed to answer #8.

- **#8: Re-interviewer Notes – Use this space to provide explanations if needed:**
 - Document if the qualifying move was not listed in #3 and/or #4 and ask for more information.
 - If the date in #5 does not match the Target QAD and ask for an explanation.
 - If any children listed in #6 are not listed on the COE and provide an explanation.

2020-2021 Re-Interview Form

8. Re-interviewer Notes – Use this space to provide explanations if needed.

- If the response to #3 and/or #4 is “no”, ask for an explanation.
- If date in #5 does not match the Target QAD, ask for an explanation.
- If any child listed in #6 is not listed on the COE, provide a clarification.

9. Optional Notes – May be used if more space is needed to answer #8.

- **#9: Optional Notes – May be used if more space is needed to answer #8:**
 - Or, include any additional information provided by the interviewee that is relevant to eligibility.

2020-2021 Re-Interview Form

To the best of my knowledge, the information documented on this form is correct.

De acuerdo a mi conocimiento y entendimiento, la información estipulada en éste documento es verdadera.

Signature of person interviewed: Interviewee Signature / COVID-19 Call Date: MM/DD/YY

Signature of re-interviewer: Interviewer Signature Date: MM/DD/YY

If re-interview is completed by phone –

Location (city, state) of person interviewed: _____

Phone number of person interviewed: _____

- Capture the interviewee's signature and the date (MM/DD/YY) the form was completed. Follow the COVID-19 protocol (if applicable).
- Capture the interviewer's signature and the date (MM/DD/YY) the form was completed.
- Ensure to compare the COE to the re-interview form and ask any additional clarifying questions if needed.

2020-2021 Re-Interview Form

To the best of my knowledge, the information documented on this form is correct.

De acuerdo a mi conocimiento y entendimiento, la información estipulada en éste documento es verdadera.

Signature of person interviewed: _____

Date: _____

Signature of re-interviewer: _____

Date: _____

If re-interview is completed by phone –

Location (city, state) of person interviewed: Tampa, Florida

Phone number of person interviewed: (123) 456-8910

- Document the location (city, state) of person interviewed.
- Include the telephone number with area code.

2020-2021 Re-Interview Form

FOR LOCAL MEP ADMINISTRATOR USE ONLY

LOA Administrator Signature:

Review Date:

Eligible as documented on COE

Eligible with corrections
on COE required

Need more information
to make determination

Not Eligible

• FOR ADMINISTRATOR USE ONLY:

- Local MEP administrator should sign and date the re-interview form once the form has been reviewed for accuracy.
- Ensure that the COE is compared to the re-interview form and ask additional clarifying questions if needed.
- Check *Eligible as documented on COE, Eligible with corrections on COE required, Need more information to make a determination, or Not Eligible.*

2020-2021 Re-Interview Form

FOR STATE MEP ID&R OFFICE USE ONLY

State ID&R Office Staff Signature:

Review Date:

<input type="checkbox"/> Eligible as documented on COE	<input type="checkbox"/> Eligible with corrections on COE required	<input type="checkbox"/> Need more information to make determination	<input type="checkbox"/> Not Eligible
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- **FOR STATE MEP ID&R USE ONLY:** The ID&R Office will review and date the re-interview form and contact the district if there are any discrepancies.
- The ID&R Office will then check *Eligible as documented on COE*, *Eligible with corrections on COE required*, *Need more information to make a determination*, or *Not Eligible*.

Training Attendance

Thank you for completing this training.

To count your attendance, and to receive the link to the assessment, please email the full name and title of each staff member who completes this training and the date that it was completed to the ID&R Office at fl-idr-office@escmail.org.

Example – “Lupi Ginn, Senior ID&R Trainer, attended the Florida Re-interview Documentation Webinar.”



Contact us via phone or email:

ID&R Office | Tampa, FL

Phone : 866.963.6677

general email:

fl-idr-office@escmail.org

