



2026 – 2027 MILITARY-CONNECTED YOUTH STUDENT INFORMATION UPDATE FORM

All Delaware public schools starting with the 2016 – 2017 school year are required to annually identify enrolled students who are “military-connected youth” pursuant to 14 **DE Admin. Code** 932, 14 **Del.C.** Chapter 1, §122 (b)(28), 10 U.S.C. §101(d) (2014), and the reauthorized Every Student Succeeds Act (2015), 20 U.S.C. 6301 et seq. in order to provide your student with additional supports and services, if needed.

Please read the following statements and check the appropriate box below.

- This form should be completed by a parent or stepparent annually.
- If your student is not a “military-connected youth”, please check the third box, “Non-Applicable”.

CHECK ONE OF THE FOLLOWING:

FEDERAL “Active Duty” - I am a parent or stepparent who is an “**active duty**” member of the Armed Forces (United States Army, United States Navy, United States Air Force, United States Marine Corps, or United States Coast Guard) pursuant to 10 U.S.C. §101(d) (2014), and the reauthorized Every Student Succeeds Act (2015), 20 U.S.C. 6301 et seq.

STATE “Active Duty/Recently Retired/Reserves/Identified as a Disabled Veteran/Killed in Action” pursuant to 14 **DE Admin. Code** 932, 14 **Del.C.** Chapter 1, §122 (b)(28), 10 U.S.C. §101(d) (2014).

- I am a parent or stepparent who is an active-duty member of the National Guard, National Oceanic and Atmospheric Administration or the United States Public Health Service.
- I am a parent or stepparent, or there is an immediate family member, including a sibling or any other person **residing in the same household**, who is serving in the reserve component, identified as a disabled veteran, killed in action, or recently retired (within 18 months prior to September 30 of the current school year) from a branch of the United States armed forces. Such branches consist of the United States Army, United States Air Force, United States Marine Corps, United States Navy, National Guard, United States Coast Guard, National Oceanic and Atmospheric Administration or the United States Public Health Service.
- There is an immediate family member, including a sibling or any other person **residing in the same household**, who is on active-duty member of the United States Army, United States Air Force, United States Marine Corps, United States Navy, National Guard, United States Coast Guard, National Oceanic and Atmospheric Administration or the United States Public Health Service.

NON-APPLICABLE

Student Name: _____

Grade: _____

School Name: _____

Homeroom Teacher Name: _____

Please return this form to your student’s homeroom teacher on or before Monday, September 21, 2026.