

# VRABE Regional Adult Based Education Student Information Form rev 10-11-17

For "Help" completing form, hold down the CTRL key while clicking on the "Help" key in lower right corner of the section

<b>Check One Box:</b> <input type="checkbox"/> Returning Student <input type="checkbox"/> New Student		<b>Orientation Site:</b> <b>Site Attending:</b>	
<b>Application Date:</b> <a href="#">Help on Section 1</a>		<b>Program (Check One):</b> <input type="checkbox"/> ABE <input type="checkbox"/> CDP <input type="checkbox"/> ESL <input type="checkbox"/> GED <input type="checkbox"/> NEDP <input type="checkbox"/> CITZ	
<b>Prefix</b>	<b>First Name</b>	<b>M.I.</b>	<b>Last Name</b>
<b>Home Street Address</b>		<b>City</b>	<b>Zip</b>
<b>Home Phone</b>	<b>Cell Phone</b>	<b>Email Address</b>	
<b>Name of Employer</b>		<b>Work Telephone</b>	
<b>Employer Street Address</b>		<b>City</b>	<b>Zip</b>
<b>Birth Date (MM/DD/YYYY):</b>		<b>Country Born:</b>	
<b>Gender:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male <a href="#">Help on Section 2</a>		<b>Ethnicity (must select one)</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> NOT Hispanic or Latino	
<b>Social Security Number:</b> <b>(If available)</b>		<b>Race (check all that apply)</b>	
<b>Highest Educational Level Completed at Entry (Check ONLY One)</b>		<input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	
<input type="checkbox"/> 0 - No schooling <input type="checkbox"/> 7 <input type="checkbox"/> 1 <input type="checkbox"/> 8 <input type="checkbox"/> 2 <input type="checkbox"/> 9 <input type="checkbox"/> 3 <input type="checkbox"/> 10 <input type="checkbox"/> 4 <input type="checkbox"/> 11 <input type="checkbox"/> 5 <input type="checkbox"/> 12 - No diploma <input type="checkbox"/> 6		<b>ID Number:</b>	
<input type="checkbox"/> High School Diploma or alternate credential <input type="checkbox"/> GED <input type="checkbox"/> Some college or university, no degree <input type="checkbox"/> Associates, Bachelors or Professional Degree		<b>ID Type</b> <input type="checkbox"/> Driver's License <input type="checkbox"/> Inmate No. <input type="checkbox"/> Military ID <input type="checkbox"/> Other ID <input type="checkbox"/> Passport <input type="checkbox"/> SASID	
<b>Where was this education level/degree attained? (Check ONLY One)</b>		<b>SASID # (if available):</b>	
<input type="checkbox"/> In USA <input type="checkbox"/> Not in USA		<b>Military Service (Check Only One)</b> <input type="checkbox"/> No Military Service <input type="checkbox"/> National Guard <input type="checkbox"/> Active Duty <input type="checkbox"/> Reserves <input type="checkbox"/> Veteran	
<b>Location of Last High School Attended:</b> <input type="checkbox"/> Connecticut <input type="checkbox"/> Out of State <input type="checkbox"/> Home Schooled <input type="checkbox"/> Foreign Country		<b>Enter High School Name if in the US:</b> <i>*If you attended high school in the US, you must enter it here.</i>	
<b>Employment Status (required, check ONLY one)</b> <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed – Seeking Employment <input type="checkbox"/> Unemployed – Not Seeking Employment/Retired		<b>Miscellaneous Characteristics (check all that apply)</b> <input type="checkbox"/> Comm. Alt. Corrections <input type="checkbox"/> Correctional Facility <input type="checkbox"/> Homeless <input type="checkbox"/> Immigrant <input type="checkbox"/> Institutionalized <input type="checkbox"/> Mother Under 17 <input type="checkbox"/> Needs Child/Dependent Care <input type="checkbox"/> Needs Transportation	
<b>Even Start Status (optional)</b> <input type="checkbox"/> Even Start Applicant  <a href="#">Help on Section 3</a>		<b>Parent/Guardian of: (check all that apply)</b> <input type="checkbox"/> Child(ren) 5 years and younger <input type="checkbox"/> Child(ren) 6 to 10 years <input type="checkbox"/> Child(ren) 11 to 18 years	

**Rural/Urban Status (optional)**

- Rural  
 Urban/High Unemployment

**Welfare Status (optional)**

- General Assistance (SAGA)  
 TANF/TFA

### Reasons for Enrollment – Check all that apply

**EDUCATION (Check all that apply)**

- Improve Basic Skills - ABE(Pre-GED)/ESL  
 Enter College or Post-Secondary Training  
 Progress Toward HS diploma (CDP, NEDP, GED)  
 Earn a HS diploma

**FAMILY (check all that apply)**

- Increase Involvement in Children's Schooling  
 Participate in Parent and Child Together (PACT)  
 Participate in Parenting Education  
 Read More to Children

**EMPLOYMENT (select one)**

- Enter Employment  
 Retain Employment

**REQUIRED INSTRUCTION (check all that apply)**

- Court Order  
 Required for Public Assistance

**COMMUNITY (check all that apply)**

- Earn Citizenship  
 Use Community Services  
 Vote

**MILITARY**

- Enter Military

**EMPLOYMENT BARRIERS (Required Federal Information - check all that apply)**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Cultural Barriers   | <input type="checkbox"/> Disabled                 | <input type="checkbox"/> Ex-Offender                   |
| <input type="checkbox"/> Displaced Homemaker | <input type="checkbox"/> English Language Learner | <input type="checkbox"/> Long-Term Unemployed          |
| <input type="checkbox"/> Foster Care Youth   | <input type="checkbox"/> Homeless                 | <input type="checkbox"/> Migrant & Seasonal Farmworker |
| <input type="checkbox"/> Low Income          | <input type="checkbox"/> Low Levels of Literacy   | <input type="checkbox"/> No TANF in 2 Years or Less    |
| <input type="checkbox"/> Seasonal Farmworker | <input type="checkbox"/> Single Parent            |  |

**Notes:**

**I UNDERSTAND THAT STUDENT INFORMATION IS CONFIDENTIAL AND WILL BE USED ONLY FOR PROGRAM ADMINISTRATION, RESEARCH AND EVALUATION PURPOSES.**

**Applicant Signature Required:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For Office Use Only:**

**Appraisal Testing**

Test Type	Test Form #	Raw Score/Scale Score	Test Date
Listening			
Math			
Reading			

**Age Documented:**  Yes  No  Attached **Exempt from Appraisal Test:**  Yes  No

- Disability – Visible  
 Disability – Self-Disclosed (only if the applicant self-disclosed a hidden, non-visible disability)  
 Disability –Visible & Self-Disclosed  
 Neither

# VRABE Regional Adult Based Education Student Information Form

## Instructions

INFORMATION REQUESTED OR REQUIRED BY THE STATE OF CONNECTICUT.  
ALL INFORMATION ON THIS DOCUMENT IS KEPT CONFIDENTIAL

### Help Section 1:

1. **Returning Student / New Student:** If you have ever registered with VRABE as a student, even if it was several years ago, check "Returning Student"; otherwise, check "New Student".
2. **Application Date:** Using the drop-down menus, enter the date you start completing this form.
3. **Orientation Site, Site Attending:** Using the drop down menus, choose the site where you plan to or are taking the Orientation; then choose the site you think you'll be attending. You are not bound by this choice!
4. **Program:** Check the program you think you might be attending. You are not bound by this choice.
  - a. *ABE = Adult Basic Education*, for those needing help with basic skills in preparation for GED courses or to improve skills generally.
  - b. *CDP = Credit Diploma Program*, for those who have already completed a number of High School Credits and want to earn a Vernon Adult Education High School Diploma.
  - c. *ESL = English as a Second Language*, for those who need greater proficiency using English;
  - d. *GED = General Educational Development*, for those seeking to earn a State of Connecticut High School Diploma;
  - e. *NEDP = National External Diploma Program*, for self-directed, self-motivated students who work individually with an assessor to demonstrate mastery of high-school-level skills, and who will earn a State of Connecticut Diploma on completion;
  - f. *CITZ = Citizenship Class* required to become a citizen of the United States of America.
5. **Prefix, First Name, M.I., Last Name – REQUIRED FIELD**
  - a. *Prefix:* Your salutation: Miss, Mr., Mrs., etc.
  - b. *First Name:* Exact spelling of your first name;
  - c. *M.I.:* Your middle initial. If you don't have one, leave it blank.
  - d. *Last Name:* Exact spelling of your last name.
6. **Home Street Address, City, Zip - REQUIRED FIELD**
  - a. Enter the address where you're living now.
7. **Home Phone, Cell Phone, Email Address – Important contact information!**
  - a. Home Phone: Please include area code. If you don't have one, leave blank.
  - b. Cell Phone: Please include area code. If you don't have one, leave blank.
  - c. Email address: Enter your primary email address here.
8. **Name of Employer, Work Telephone, Employer Street Address, City, Zip**
  - a. Enter your employer's information. If unemployed, leave blank.

[Return to Section 1](#)

## Help Section 2:

9. **Birth Date:** **REQUIRED FIELD** Use the drop-down menus to enter your date of birth.
10. **Country Born:** **REQUIRED FIELD** Enter the country in which you were born, regardless of current citizenship.
11. **Gender:** **REQUIRED FIELD** Enter the gender you identify with.
12. **Social Security Number:** If available, enter your social security information.
13. **Ethnicity:** **REQUIRED FIELD** Check whether you are Hispanic or Latino or NOT Hispanic or Latino.
14. **Highest Educational Level Completed at Entry:** **REQUIRED FIELD** Check the highest level you completed, from whatever country. For example if you did not complete your senior year of high school, you would check "11". If you have a high school diploma, GED or college work, check the appropriate box.
15. **Race:** **REQUIRED FIELD** Check the boxes that indicate your race(s)
16. **ID Number:** We require positive identification, such as a Driver's License, with an Identification Number. Enter the number on the ID here.
17. **ID Type:** If not listed, check "Other ID".
18. **SASID #:** This is the "State Assigned Student Identifier", a unique number given to all Connecticut students. It's a long number, so if you don't know it, just leave this box blank.
19. **Where was this education level/degree attained:** **REQUIRED FIELD** Enter whether your highest level of education was earned in the United States, or not in the United States.
20. **Military Service:** Check the appropriate box.
21. **Last High School Attended:** **REQUIRED FIELD** The State of Connecticut requires this information. Use the drop-down menu, and if a United States high school enter it to the right.
22. **Employment Status:** **REQUIRED FIELD** Check appropriate box.
23. **Miscellaneous Characteristics:** Optional. Check appropriate boxes.

## [Return to Section 2](#)

## Help Section 3:

24. **Even Start Status:** Optional. Check appropriate box.
25. **Parent/Guardian of:** Optional. Check appropriate boxes.
26. **Rural/Urban Status:** Optional. Check appropriate box.
27. **Welfare Status:** Optional. Check appropriate box.
28. **Reason for Enrollment:** Check appropriate boxes.
29. **Barriers to Employment:** **REQUIRED FIELD IF SEEKING EMPLOYMENT** Check appropriate boxes.
30. **Signature:** **REQUIRED FIELD** This form MUST be signed and dated.

## [Return to Section 3](#)