

# VRABE Regional Adult Based Education Student Information Form

Rev. 7/15/2019

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<b>First Name:</b>	<b>M.I.</b>	<b>Last Name:</b>
<b>Birth Date: Month/Day/YEAR</b> ___/___/_____		<b>Gender:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male
<b>Home Street Address:</b>	<b>City:</b>	<b>Zip:</b>
<b>Home Phone:</b>	<b>Cell Phone:</b>	<b>Email:</b>
<b>Social Security Number:</b>		<b>Country of Birth:</b>
<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> NOT Hispanic or Latino		
<b>Race: (Check all that apply):</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		
<b>ID Type:</b> <input type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other ID <input type="checkbox"/> SASID <input type="checkbox"/> Military ID		
<b>ID Number:</b>		
<b>Emergency Contact Name:</b>		<b>Emergency Contact Number(s):</b>
<b>Emergency Contact Address:</b>		
<b>Employment Status:</b> <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed –Seeking Employment <input type="checkbox"/> Unemployed –Not Seeking Employment/Retired <input type="checkbox"/> Employed- But Notice of Termination or Employment or Military Separation is pending		
<b>Name of Employer:</b>		<b>Work Telephone:</b>
<b>Employer Street Address:</b>	<b>City:</b>	<b>Zip:</b>
<b>Employment Barriers: (Check all that Apply)</b> <input type="checkbox"/> Cultural Barrier <input type="checkbox"/> Displaced Homemaker <input type="checkbox"/> Foster Care Youth <input type="checkbox"/> Low Income <input type="checkbox"/> Migrant/Seasonal Farmworker <input type="checkbox"/> Disabled <input type="checkbox"/> English Language Learner <input type="checkbox"/> Homeless <input type="checkbox"/> Low Level of Literacy <input type="checkbox"/> Single Parent <input type="checkbox"/> Ex-Offender <input type="checkbox"/> Long-term Unemployed <input type="checkbox"/> No TANF in 2 years of less		
<b>Highest Educational Level Completed: (Check ONLY One)</b> <input type="checkbox"/> 0 - No schooling <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 – No Diploma <input type="checkbox"/> Home School <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>Location of Last High School:</b>		<b>High School Name (If in US):</b>
<b>Where was the last level/Degree Attained?</b> <input type="checkbox"/> In USA <input type="checkbox"/> Not in the USA		
<b>Military Service:</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>Parent/Guardian:</b> <input type="checkbox"/> Child(ren) 5 years and younger <input type="checkbox"/> Child(ren) 6 -10 years <input type="checkbox"/> Child(ren) 11 to18 years		
<b>Check all that Apply:</b> <b>Even Start Status:</b> <input type="checkbox"/> Even Start Applicant <b>Rural/Urban Status:</b> <input type="checkbox"/> Rural <input type="checkbox"/> Urban/High Unemployment <b>Welfare Status:</b> <input type="checkbox"/> General Assistance (SAGA) <input type="checkbox"/> TANF-TFA <b>Miscellaneous Characteristics:</b> <input type="checkbox"/> Comm. Alt. Corrections <input type="checkbox"/> Homeless <input type="checkbox"/> Institutionalized <input type="checkbox"/> Needs Child/Dependent Care <input type="checkbox"/> Correctional Facility <input type="checkbox"/> Immigrant <input type="checkbox"/> Mother Under 17 <input type="checkbox"/> Needs Transportation		

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**Reasons for Enrollment- Check all that apply**

**Education:**

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

**Employment:**

- Enter Employment
- Retain Employment

**Community:**

- Earn Citizenship
- Use Community Services
- Vote

**Military:**

- Enter Military

**Family:**

- Increase Involvement in Children's Education
- Help more frequently with school
- Increase contact with children's teachers
- Get more involved in children's school activities
- Increase involvement in Children's Lit Activities
- Read More to Children
- Visit Library
- Purchase books or magazines

**Required Instructions:**

- Court Order
- Required for Public Assistance

**I understand that student information is confidential and will be used only for program administration, research and evaluation purposes.**

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**FOR OFFICE USE ONLY:**

- Returning Student
- New Student

**Orientation Site:** \_\_\_\_\_

**Site Attending:** \_\_\_\_\_

**Program (Check One):**  ABE  GED  CDP  NEDP  ESL  CITZ

**Age Documented:**  Yes  No  ID Attached

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

**Exempt from Appraisal Test:**  Yes  No

**Appraisal Testing:**

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

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