

Student Registration Information Form

Date Submitted:		Program Option(s)	
Student Type: ☐ Returning ☐ New		☐ ESL (AM)	☐ GED (PM)
		☐ ESL (PM)	☐ GED Walk-in
		☐ GED (AM)	☐ ABE (Afternoon)
Staff Use Only:		☐ PEP-Family Literacy	☐ IELCE Student
		☐ ESL Student	☐ ABE (Evening)
		☐ Citizenship	☐ NEDP
Personal Information			
Last Name	First Name	Middle Name	Suffix
Preferred Name		Date of Birth / /	Residence Area ☐ Rural ☐ Urban
Social Security Number	SASID	Gender ☐ Male ☐ Female ☐ Other	
Country You Were Born In	Language Spoken at Home		
Ethnicity: ☐ Hispanic or Latino		☐ Not Hispanic or Latino	
Race: ☐ American Indian or Alaskan Native ☐ Asian		☐ Black or African American ☐ White	☐ Native Hawaiian or Other Pacific Islander
Contact Information			
Home Street Address			
City	County	State	Zip Code
Phone Number		Type ☐ Cell ☐ Home	
Email Address			
Emergency Contact Name	Emergency Contact Number	Emergency Contact Relation	
WIOA Core Programs			
Title I Adult Do you receive individualized services through the AJC? Receive regular career counseling (group or individual) assigned worker appointments? Enrolled in training (for age 24+) paid for by the AJC?			☐ Yes ☐ No
Title I Dislocated Worker Do you receive unemployment benefits? Identify as a dislocated worker or trying to return to work from previously working as a homemaker?			☐ Yes ☐ No

Title I Youth Are you currently an in-school or out-of-school youth who is out and receiving services from your local American Job Center (AJC)?	☐ Yes ☐ No
Title III Wagner-Peyser Are you currently registered with your local AJC? Do you currently utilize your local AJC for workshops and the self-serve computer access?	☐ Yes ☐ No
Title IV Vocational Rehabilitation Are you currently working with the Bureau of Rehabilitation Services (BRS) to find employment? Do you have a disability that impacts your ability to obtain and maintain employment? Do you have an employment plan with the state vocational rehabilitation agency/BRS/BESB?	☐ Yes ☐ No
Education Information	
Highest Education Level Completed:	
Highest Educational Level Location: ☐ United States-based schooling ☐ Non-United States-based schooling	
Last School Attended:	
Employment Information	
Employment Status: ☐ Employed, Full Time ☐ Employed, Part Time ☐ Unemployed ☐ Not looking for work ☐ Unavailable for work ☐ Retired ☐ Employed with Separation Notice	
Name of Employer:	
Barriers to Education	
Cultural Barriers Do you feel your culture, beliefs, or practices makes finding/keeping a job harder?	☐ Yes ☐ No
Disabled Do you wish to disclose any disability that limits your life activities?	☐ Yes ☐ No
Displaced Homemaker Are you a former homemaker who is having trouble finding a job or a better job?	☐ Yes ☐ No
Low Income / Public Assistance Do you have a low income? Do you receive SNAP, TANF, SSI, or local public assistance? Are you a foster child or homeless?	☐ Yes ☐ No
English Language Learner Are you an English Language Learner?	☐ Yes ☐ No
Ex Offender Have you been subjected to any stage of the criminal justice process for committing a status offense or delinquent act? Do you have a previous record of arrest or conviction?	☐ Yes ☐ No
No TANF Within 2 Years or Less Within two years, will you no longer be eligible to receive Temporary Assistance for Needy Families (TANF) benefits?	☐ Yes ☐ No
Youth in Foster Care Are/were you in the foster care system AND are under 24 years old?	☐ Yes ☐ No

Homeless or Runaway Youth Are you homeless? Do you lack a regular and adequate residence? Do you live in a motel, hotel, campground, transitional housing or with another person because you lost your house or apartment?	☐ Yes ☐ No
Long-Term Unemployed Have you been unemployed for 27 or more weeks (more than 6 months)?	☐ Yes ☐ No
Low-Level Literacy (ABE, GED, NEDP, CDP students; all students who do not have a Secondary School Diploma at entry). Are your literacy levels low?	☐ Yes ☐ No
Migrant and Seasonal Farmworker If yes, are you a: Seasonal farmworker who has worked in the last 12 months in agriculture, fish or on a farm? Seasonal worker with no permanent residence (migrant)? Dependent of a farmworker?	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No
Dislocated Worker Have you been fired or laid off? Are you unemployed because the place where you worked has closed?	☐ Yes ☐ No
Single Parent or Guardian (Or Single Pregnant Woman) Are you a single parent, unmarried or separated and have primary responsibility for one or more children under age 18, or are you a single, pregnant woman?	☐ Yes ☐ No
Miscellaneous Characteristics	
Why are you enrolling in Adult Education? ☐ Improve Job Prospects ☐ Improve English ☐ Obtain Driver's License ☐ Obtain US Citizenship ☐ Qualify for Training/Military ☐ Social / Improve My Skills ☐ Required to Attend ☐ Improve Reading Skills ☐ Improve Math Skills ☐ Get Diploma or Certificate ☐ Help My Children ☐ Qualify for College ☐ Other (Please specify):	
How did you hear about Adult Education?	
Select all that apply to you: ☐ Receive Public Assistance <i>(check all that apply)</i> ☐ SNAP ☐ TANF/TFA ☐ SSE ☐ HUSKY Health/Medicaid! ☐ SAGA ☐ RCA ☐ None of the above ☐ Minor with Adult Status ☐ Correctional ☐ Needs Child / Dependent Care ☐ Mother Under 17 - C.G.S 10-73d ☐ Immigrant ☐ Institutional ☐ Needs Transportation Which of the following do you have at home? ☐ Computer with Camera ☐ Computer without Camera ☐ Webcam ☐ Headset with Microphone ☐ Mobile Phone ☐ Home Phone ☐ Internet Access ☐ Printer ☐ Scanner	

Family Information

Are you the parent or guardian of...

- ☐ Child(ren) 5 years old & younger
 ☐ Child(ren) 11 - 18 years old
☐ Child(ren) 6 - 10 years old
 ☐ No child(ren) or child(ren) 18 years and older
☐ I am a Mother under 17 (C.G.S. 10-73d)

of child(ren) 5 years old & younger: _____

Name of Windsor school(s) attending: _____

of child(ren) 6 - 10 years old: _____

of child(ren) 11-18 years old: _____

Exam Dates & Times

Computer Acceptable Use Policy

☐ I agree to take personal responsibility for following the rules of the acceptable use policy stated in this contract. I will:

1. Use the on-line resources provided by my school ONLY for school-sanctioned projects.
2. Use the on-line resources provided by my school ONLY with the permission of a teacher or library media specialist.
3. Use language on-line which is consistent with school policy.
4. Not tamper with equipment or software; nor alter the network interface; nor attempt to gain access to the data and files of others; nor attempt to access information on the Internet, or other online services, not consistent with the educational goals of the school; nor violate any copyright laws.
5. Report any problems or breaches of this agreement to a teacher.
6. Not use the Internet inappropriately and understand that if I do, my behavior will result in:
 - a. Losing all on-line privileges within the school setting.
 - b. Being subjected to disciplinary measures under Windsor Adult Education Policy, Board of Education Policy, and/or being referred to the appropriate legal authorities, if warranted.

Electronic Signature

Signature: _____

I am willing to be included in data matching for the benefit of Windsor Adult Education.

**Data matching is used to improve program performance and serve students. The data will be compiled to find out how well adult education programs are performing throughout the country and to improve Windsor's program services. All information will be kept confidential and NO NAMES, OR OTHER IDENTIFYING INFORMATION will be associated with your data.*

- ☐ I agree
☐ I do not agree

I give permission for Windsor Adult Education to use my photograph, likeness, video and audio, artwork and /or story in publications, web pages or other materials produced, used by and representing Windsor Adult Education.

- ☐ I agree
☐ I do not agree