

WIOA Title II Client Intake

Adult Education & Literacy

Grantee/Agency Name		Instructor		Student Enrollment Date																															
Student's Last Name		First Name	Middle Initial	Social Security Number																															
Phone #	Alternate Phone #	Email		F1 Visa? <input type="checkbox"/> Yes <input type="checkbox"/> No																															
Street Address			City	State	ZIP Code																														
Date of Birth ____/____/____	Age	Gender <input type="checkbox"/> M <input type="checkbox"/> F	Ethnicity <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> non-Hispanic/ non-Latino	Race (check all that apply) <input type="checkbox"/> American Indian or Native Alaskan <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Pacific Islander																															
Program <input type="checkbox"/> Adult Education <input type="checkbox"/> IELCE <input type="checkbox"/> IET <input type="checkbox"/> ABE <input type="checkbox"/> ELA/ESL <input type="checkbox"/> HSE/SSD (secondary school diploma)			Schooling <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 20%; text-align: center;">In the U.S.</th> <th style="width: 20%; text-align: center;">Outside the U.S.</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Did not attend school</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Attended graded 1-5</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr style="background-color: #f2f2f2;"> <td><input type="checkbox"/> Attended grades 6-8</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Attended grades 9-12 (no diploma)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr style="background-color: #f2f2f2;"> <td><input type="checkbox"/> Secondary school diploma</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Secondary school recognized equivalent</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr style="background-color: #f2f2f2;"> <td><input type="checkbox"/> Some postsecondary education, no degree</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Postsecondary or professional degree</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Unknown</td> <td></td> <td></td> </tr> </tbody> </table>				In the U.S.	Outside the U.S.	<input type="checkbox"/> Did not attend school			<input type="checkbox"/> Attended graded 1-5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Attended grades 6-8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Attended grades 9-12 (no diploma)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Secondary school diploma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Secondary school recognized equivalent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Some postsecondary education, no degree	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Postsecondary or professional degree	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Unknown		
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Employed? <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Employed with separation notice			Additional Program Goals <input type="checkbox"/> Achieve citizenship skills <input type="checkbox"/> <i>Obtain citizenship</i> <input type="checkbox"/> Vote or register to vote <input type="checkbox"/> Leave public assistance <input type="checkbox"/> Increase involvement in your child's education <input type="checkbox"/> Increase involvement in your child's literacy activities <input type="checkbox"/> Increase involvement in your community																																
Looking for Work? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unavailable for Work																																			
Status on Entry (check all that apply) <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Cultural barriers</td> <td><input type="checkbox"/> Foster care youth</td> </tr> <tr> <td><input type="checkbox"/> Disabled <input type="checkbox"/> Learning disability</td> <td><input type="checkbox"/> Homeless</td> </tr> <tr> <td><input type="checkbox"/> Dislocated worker</td> <td><input type="checkbox"/> Immigrant</td> </tr> <tr> <td><input type="checkbox"/> Displaced homemaker</td> <td><input type="checkbox"/> Long-term unemployed</td> </tr> <tr> <td><input type="checkbox"/> Economically disadvantaged or low income</td> <td><input type="checkbox"/> Low literacy</td> </tr> <tr> <td><input type="checkbox"/> English language learner</td> <td><input type="checkbox"/> Migrant farmworker</td> </tr> <tr> <td><input type="checkbox"/> Ex-offender</td> <td><input type="checkbox"/> Seasonal farmworker</td> </tr> <tr> <td><input type="checkbox"/> Exhausting TANF within next 2 years</td> <td><input type="checkbox"/> Single parent or guardian</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Public assistance</td> </tr> <tr> <td></td> <td><input type="checkbox"/> U.S. Citizen</td> </tr> <tr> <td></td> <td><input type="checkbox"/> U.S. Veteran</td> </tr> </table>			<input type="checkbox"/> Cultural barriers	<input type="checkbox"/> Foster care youth	<input type="checkbox"/> Disabled <input type="checkbox"/> Learning disability	<input type="checkbox"/> Homeless	<input type="checkbox"/> Dislocated worker	<input type="checkbox"/> Immigrant	<input type="checkbox"/> Displaced homemaker	<input type="checkbox"/> Long-term unemployed	<input type="checkbox"/> Economically disadvantaged or low income	<input type="checkbox"/> Low literacy	<input type="checkbox"/> English language learner	<input type="checkbox"/> Migrant farmworker	<input type="checkbox"/> Ex-offender	<input type="checkbox"/> Seasonal farmworker	<input type="checkbox"/> Exhausting TANF within next 2 years	<input type="checkbox"/> Single parent or guardian		<input type="checkbox"/> Public assistance		<input type="checkbox"/> U.S. Citizen		<input type="checkbox"/> U.S. Veteran											
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Forms (staff use only) <input type="checkbox"/> Release of information <input type="checkbox"/> Parental consent (under age 18) <input type="checkbox"/> Completed L-6 form <input type="checkbox"/> IET waiver, if applicable <small>(for all students without a HS diploma or GED)</small> <input type="checkbox"/> Consent of non-enrollment (ages 16-21)			Assessment (staff use only) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Test</td> <td style="width: 15%;">Test date ____/____/____</td> <td style="width: 15%;">Form</td> <td style="width: 30%;">Level</td> </tr> <tr> <td>Scores</td> <td>Entered into MIS ____/____/____</td> <td colspan="2">Initials</td> </tr> </table>			Test	Test date ____/____/____	Form	Level	Scores	Entered into MIS ____/____/____	Initials																							
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