

INTAKE INFORMATION

1 STUDENT INFORMATION

SSN: _____ Driver's License #: _____
 Last Name: _____ First Name: _____ MI: _____
 Cell Phone: _____ Date of Birth: _____ Email: _____

2 ADDRESS

County of Residence: _____
 Street: _____ City: _____
 State: _____ ZIP: _____

3 OTHER

Last grade completed: _____ Check if Completed Outside U.S. Gender: Male Female
 Living Area: Rural Urban Years out of school? : _____ Hispanic Origin? : Yes No

4 CURRENTLY RECEIVING:

___ Unemployment Insurance
 ___ Disability SSI
 ___ TANF
 ___ SNAP
 ___ Medicaid

5 RACE:

___ American Indian/Alaskan Native
 ___ Black, or African American
 ___ Asian
 ___ Hispanic or Latino
 ___ White, Not of Hispanic Origin
 ___ Native Hawaiian or Pacific Islander

6 OTHER STUDENT INFORMATION:

___ Homeless
 ___ U. S. Citizen
 ___ Veteran
 ___ Immigrant

When is the best time for you to attend classes? (Please check all that apply.)

Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning (8am to 12PM)							
Afternoon (12pm to 4PM)							
Evening (4pm to 8PM)							

I give the Kentucky Council on Postsecondary Education (CPE) and Kentucky Skills U permission to release my post-secondary enrollment, GED Testing Service® information, and employment status to Kentucky Skills U providers as well as this enrollment information to the Kentucky Community and Technical College System or any other public postsecondary institution.

 Student Signature

 Date

Release of Information:

JCTC- KY Skills U has permission to release my attendance records, test scores, and other information pertinent to my education to:

- KAERS Data entry system
- Corrections, Probation & Parole (PO name) _____
- JAG (Job for America Graduates)/ KentuckianaWorks/KCC
- SNAP Office and DBCS
- Ministerial Association/ Christmas Program
- Employer _____
- Jefferson Community and Technical College
- AOKY- Accelerated Opportunity
- Name or photos to the media
- Other _____

ENROLLMENT INFORMATION (STAFF USE ONLY)

<p>Enroll Date: _____</p> <p>Site: _____</p>	<p>EMPLOYMENT STATUS</p> <p><input type="checkbox"/> Correctional Facility</p> <p><input type="checkbox"/> Not in Labor Force</p> <p><input type="checkbox"/> Employed but Notice Termination</p> <p><input type="checkbox"/> Employed FT/PT</p> <p><input type="checkbox"/> Unemployed</p>	<p>SECONDARY EDUCATION CREDENTIAL</p> <p><input type="checkbox"/> GED/High School Equivalency</p> <p><input type="checkbox"/> High School Diploma</p> <p><input type="checkbox"/> Other High School Equivalency</p> <p><input type="checkbox"/> None</p> <p><input type="checkbox"/> Non U.S.-based High School Diploma</p>
---	--	--

<p>ENROLLMENT SOURCE</p> <p><input type="checkbox"/> Community Partner</p> <p><input type="checkbox"/> County Jail</p> <p><input type="checkbox"/> Court Ordered</p> <p><input type="checkbox"/> Employer/Business</p> <p><input type="checkbox"/> Media Influence</p> <p><input type="checkbox"/> Personal Referral (Word of Mouth)</p> <p><input type="checkbox"/> Post-Secondary School Referral</p> <p><input type="checkbox"/> Probation and Parole</p> <p><input type="checkbox"/> Secondary School Referral</p> <p><input type="checkbox"/> State Institution</p> <p><input type="checkbox"/> Walk-In (Not Referred)</p> <p><input type="checkbox"/> WIOA Core Partner</p>	<p>PROGRAM TYPE</p> <p><input type="checkbox"/> Adult Education or ESL</p> <p><input type="checkbox"/> AE/ESL Carry-Over Achievements</p> <p><input type="checkbox"/> Official Practice Test (OPT)/Paraeducator</p>	<p>ENROLLMENT SUBJECT</p> <p><input type="checkbox"/> Reading</p> <p><input type="checkbox"/> Math</p> <p><input type="checkbox"/> Language</p>
--	--	--

<p>SERVICE TYPE</p> <p><input type="checkbox"/> Adult Ed at the Workplace</p> <p><input type="checkbox"/> Family Literacy</p> <p><input type="checkbox"/> Corrections</p> <p><input type="checkbox"/> EL/Civics</p> <p><input type="checkbox"/> SNAP E&T Treatment</p> <p><input type="checkbox"/> SNAP E&T Control</p> <p><input type="checkbox"/> IET</p>	<p><input type="checkbox"/> AOKY Fall</p> <p><input type="checkbox"/> AOKY Spring</p> <p><input type="checkbox"/> AOKY July</p> <p><input type="checkbox"/> AOKY June</p> <p><input type="checkbox"/> GED Plus (Fall)</p> <p><input type="checkbox"/> GED Plus (Spring)</p>
--	---

<p>ASSIGNED STAFF</p> <p>_____</p> <p>_____</p>	<p>INTENT</p> <p><input type="checkbox"/> Basic Skills Acquisition</p> <p><input type="checkbox"/> Gain Employment</p> <p><input type="checkbox"/> GED</p> <p><input type="checkbox"/> KESC</p> <p><input type="checkbox"/> Learn English Language</p> <p><input type="checkbox"/> NCRC</p> <p><input type="checkbox"/> Transition to College</p>
--	--

BARRIERS OF EMPLOYMENT

Individual with a Disability? ___ Yes ___ No

CATEGORY OF DISABILITY (Check all that apply)

<input type="checkbox"/> Physical/Chronic Health Condition	<input type="checkbox"/> Physical/Mobility Impairment	<input type="checkbox"/> Mental or Psychiatric
<input type="checkbox"/> Vision-related Disability	<input type="checkbox"/> Hearing-related disability	<input type="checkbox"/> Learning Disability
<input type="checkbox"/> Cognitive/Intellectual Disability	<input type="checkbox"/> No Disability	

Exhausting TANF within 2 Years? ___ Yes ___ No

Homeless Participant, Homeless Children and Youths or Runaway Youth? ___ Yes ___ No

Single Parent? ___ Yes ___ No

Low Income Status? ___ Yes ___ No

Cultural Barriers? ___ Yes ___ No

Foster Care Youth Status? ___ Yes ___ No

Ex-Offender? ___ Yes ___ No

Migrant and Seasonal Farmworkers? ___ Yes ___ No

Displaced Homemaker? ___ Yes ___ No

Long-term Unemployed? ___ Yes ___ No

Regular Transportation? ___ Yes ___ No

Custody of at Least One Child under the Age of 6? ___ Yes ___ No