

**eData V2 Class/Group/Pair Maintenance**

\*Class/Group Name \_\_\_\_\_

\*Contract Program Component \_\_\_\_\_

\*Service (select one based on class/group contract)

064 Contract			061 Contract	054 Contract
<input type="checkbox"/> ABE-Federal	<input type="checkbox"/> ASE-Federal	<input type="checkbox"/> ESL-Federal		<input type="checkbox"/> ABE
<input type="checkbox"/> ABE-State	<input type="checkbox"/> ASE-State	<input type="checkbox"/> ESL-State		<input type="checkbox"/> ASE
<input type="checkbox"/> ABE-Combination	<input type="checkbox"/> ASE-Combination	<input type="checkbox"/> ESL-Combination	<input type="checkbox"/> ESL	<input type="checkbox"/> ESL

\*Levels (Select all that apply)

- Beginning Literacy ABE
- Beginning ABE
- Low Intermediate ABE
- High Intermediate ABE

- Low Adult Secondary
- High Adult Secondary

- Beginning Literacy ESL
- Low Beginning ESL
- High Beginning ESL
- Low Intermediate ESL
- High Intermediate ESL
- Advanced ESL

\*Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\*End Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\*Special Program Type

- Not Applicable
- Workplace Literacy
- Postsecondary Transition
- Integrated Education and Training (classes only) – with credential
- Integrated Education and Training (classes only) – without credential
- Distance Learning

\*Enrollment Type (Select one)  Open Entry-Open Exit  Managed Enrollment

Keyword \_\_\_\_\_

**For Groups Only**

\*Hours per week \_\_\_\_\_

\*Total hours projected for the year \_\_\_\_\_

**Pair Form**

\*Staff Name \_\_\_\_\_

- \*Staff Type
- Volunteer
  - None
  - Fully Division Funded
  - Partial Division Funded
  - Other Funded

\*Adult Name \_\_\_\_\_

\*Contract Program Component \_\_\_\_\_

\*Service (select one based on pair contract)

064 Contract			061 Contract	054 Contract
<input type="checkbox"/> ABE-Federal	<input type="checkbox"/> ASE-Federal	<input type="checkbox"/> ESL-Federal	<input type="checkbox"/> ABE	<input type="checkbox"/> ABE
<input type="checkbox"/> ABE-State	<input type="checkbox"/> ASE-State	<input type="checkbox"/> ESL-State	<input type="checkbox"/> ASE	<input type="checkbox"/> ASE
<input type="checkbox"/> ABE-Combination	<input type="checkbox"/> ASE-Combination	<input type="checkbox"/> ESL-Combination	<input type="checkbox"/> ESL	<input type="checkbox"/> ESL

\*Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_

End Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**\*Special Program Type**

- Not Applicable
- Workplace Literacy
- Postsecondary Transition

Keyword \_\_\_\_\_

Continue Next Year  Y  N

\*Hours per week \_\_\_\_\_

\*Total hours projected for the year \_\_\_\_\_