

eData Adult Maintenance Intake/Exit

Demographic Data (Required Fields-*)

Important: Individuals in F-1 immigration status are prohibited from attending publicly funded adult/family literacy education programs.

Please Use Full Name

Prefix _____ ***First Name** _____ Middle Name _____ ***Last Name** _____

Suffix _____ Maiden Name, Preferred Name or Nickname _____

***Date of Birth** (mm/dd/yyyy) _____

***Sex** Male Female Non-binary Prefer not to answer

What is your gender identity? (Optional)

What are your pronouns? (Optional)

she/her/hers

he/him/his

they/them/theirs

not listed: _____

man

woman

transgender

non binary

gender non-conforming

not listed: _____

Social Security Number (SSN) _____ - _____ - _____

***Address 1** _____

Address 2 _____

***City** _____ ***State** _____ ***Zip Code** _____ Zip+4 _____

***Area** Rural Urban

***County** _____

Last Pennsylvania Public School or School District attended _____

***Date First Started in Adult Ed** _____

***Ethnicity**

1. Are you Hispanic/Latino? Yes No

2. What is your race? (choose one or more)

American Indian or Alaskan Native

Black or African American

White (not Hispanic)

Asian

Native Hawaiian or other Pacific Islander

Contact Information

Email address _____

Home Phone _____

Call Home Yes No

Cell Phone _____

Call Cell Yes No

Work Phone _____ Extension _____

Call Work Yes No

Program Year Details

OFFICE USE ONLY
Adult Status Active Inactive Completed Left Keyword _____
***Period of Participation Start Date** _____ **Period of Participation Exit Date** _____
***Primary Assignment** Class Group Pair
Distance Learner Provided by Local Agency
Incarceration Released Date _____ **SID #** _____
Leave of absence **Scheduled Return Date** _____
Reason for Leave of absence (select one) - Medical Work-related Extended visit to home country Other (If other, please specify) _____

Prior Schooling

***Adult most recently attended school (Select one)** United States based schooling Non-US schooling
***Highest Grade Completed (K-11)** _____
 Attended/Did not complete grade 12 Some postsecondary education, no degree
 High School Diploma (including Alternative HS Program) Postsecondary Education degree
 High School equivalency diploma No Schooling

Enrolled in Postsecondary School at entry Yes No

If yes, name of postsecondary school school _____

*Residence (select one)	Residence Type (if institution is selected)
<input type="radio"/> Community <input type="radio"/> Institution	<input type="radio"/> In a correctional facility <input type="radio"/> In a community correctional program <input type="radio"/> In other institutional setting

***Employment Status at Program Entry (check one)**

<input type="checkbox"/> Employed ((a) is currently performing any work at all as a paid employee, (b) is currently performing any work at all in his or her own business, profession, or farm, (c) is currently performing any work as an unpaid worker in an enterprise operated by a member of the family, or (d) is one who is not working, but currently has a job or business from which he or she is temporarily absent because of illness, bad weather, vacation, labor-management dispute, or personal reasons, whether or not paid by the employer for time-off, and whether or not seeking another job.)	<input type="checkbox"/> Not Employed (not employed but seeking employment, making specific effort to find a job, and is available for work) <input type="checkbox"/> Not in the labor force (not employed and is not actively looking for work, including those who are incarcerated) <input type="checkbox"/> Employed, but received notice of termination of employment or military separation is pending
If Employed <input type="radio"/> Full Time <input type="radio"/> Part Time Employer _____	Job provided Health Benefits <input type="radio"/> Yes <input type="radio"/> No

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*Barriers to Employment - Do the following items prevent you from getting or keeping a job?		
<input type="checkbox"/>		Basic skills deficient/low level of literacy, cultural barriers, and/or English language learner – all students
Yes	No	(Check one)
<input type="radio"/>	<input type="radio"/>	Displaced homemaker — a person who has been providing unpaid services to family members in the home and who has been dependent on the income of another family member but is no longer supported by that income or is the dependent spouse of a member of the Armed Forces on active duty AND is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment.
<input type="radio"/>	<input type="radio"/>	Individual with prior justice system involvement — a person who either has been subject to any stage of the criminal justice process or requires assistance in overcoming artificial barriers to employment resulting from a record of arrest or conviction.
<input type="radio"/>	<input type="radio"/>	Exhausting TANF — a person within 2 years of exhausting lifetime eligibility.
<input type="radio"/>	<input type="radio"/>	Foster care youth — a person who is currently in foster care or has aged out of the foster care system.
<input type="radio"/>	<input type="radio"/>	Homeless individual — a person without a fixed, regular and adequate nighttime residence or runaway youth.
<input type="radio"/>	<input type="radio"/>	Individual with disability — a person with a physical or mental impairment that substantially limits one or more of the person's major life activities.
<input type="radio"/>	<input type="radio"/>	Long-term unemployed — a person who has been unemployed for 27 or more consecutive weeks.
<input type="radio"/>	<input type="radio"/>	Low-income individual — a person who within the past 6 months has received income-based assistance, such as housing supplement or food stamps, or whose total family income is below 70 percent of the lower living standard income level.
<input type="radio"/>	<input type="radio"/>	Single parent — a person who is single, separated, divorced or a widowed and has primary responsibility for one or more dependent children under age 18 or is currently pregnant.

***Migrant and Seasonal Farmworker Status at Program Entry (select one) — a person who is:**

<input type="radio"/>	Seasonal Farmworker - A low-income individual who for 12 consecutive months out of the 24 months prior to program entry has been primarily employed in agriculture or fish farming labor that is characterized by chronic unemployment or underemployment and faces multiple barriers to economic self-sufficiency
<input type="radio"/>	Migrant and Seasonal Farmworker - A seasonal farmworker and whose agricultural labor requires travel to a job site such that the farmworker is unable to return to a permanent place of residence within the same day
<input type="radio"/>	Dependent of a Seasonal or Migrant and Seasonal Farmworker - A dependent of the individual described as a seasonal or migrant seasonal farmworker above
<input type="radio"/>	Not Applicable

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<p>*Reason for Participating</p> <p><input type="radio"/> Meet employment goal</p> <p><input type="radio"/> Meet family goal</p> <p><input type="radio"/> Become US Citizen</p> <p><input type="radio"/> Meet educational goal</p> <p><input type="radio"/> Self-improvement</p> <p><input type="radio"/> Mandated</p> <p><input type="radio"/> Be with other adults</p> <p><input type="radio"/> Meet other personal goal</p> <p><input type="radio"/> Other, Specify _____</p>	<p>How did you learn about the program?</p> <table border="0"> <tr> <td><input type="radio"/> Relative, friend, acquaintance</td> <td><input type="radio"/> Community organization</td> </tr> <tr> <td><input type="radio"/> Educational institution</td> <td><input type="radio"/> Local PA CareerLink®</td> </tr> <tr> <td><input type="radio"/> Internet</td> <td><input type="radio"/> Institution staff</td> </tr> <tr> <td><input type="radio"/> Advertisement</td> <td><input type="radio"/> Court mandated or welfare required</td> </tr> <tr> <td><input type="radio"/> Worksite</td> <td><input type="radio"/> Military recruiter</td> </tr> <tr> <td><input type="radio"/> Previously attended</td> <td><input type="radio"/> Other, Specify _____</td> </tr> </table>	<input type="radio"/> Relative, friend, acquaintance	<input type="radio"/> Community organization	<input type="radio"/> Educational institution	<input type="radio"/> Local PA CareerLink®	<input type="radio"/> Internet	<input type="radio"/> Institution staff	<input type="radio"/> Advertisement	<input type="radio"/> Court mandated or welfare required	<input type="radio"/> Worksite	<input type="radio"/> Military recruiter	<input type="radio"/> Previously attended	<input type="radio"/> Other, Specify _____
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<p>Non-Educational Services (select all that apply)</p> <table border="0"> <tr> <td><input type="checkbox"/> Counseling</td> <td><input type="checkbox"/> PA CareerLink®</td> </tr> <tr> <td><input type="checkbox"/> Financial counseling</td> <td><input type="checkbox"/> Veteran's Assistance</td> </tr> <tr> <td><input type="checkbox"/> Legal aid</td> <td><input type="checkbox"/> Other</td> </tr> <tr> <td><input type="checkbox"/> OVR</td> <td>Specify _____</td> </tr> </table>	<input type="checkbox"/> Counseling	<input type="checkbox"/> PA CareerLink®	<input type="checkbox"/> Financial counseling	<input type="checkbox"/> Veteran's Assistance	<input type="checkbox"/> Legal aid	<input type="checkbox"/> Other	<input type="checkbox"/> OVR	Specify _____	<p>Special Needs (Official Diagnosis Needed)</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <hr/> <p>PA CareerLink® Referral</p> <p><input type="radio"/> Yes <input type="radio"/> No</p>
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Release of Information

By participating in this state and/or federally funded adult education and/or family literacy program, I agree to the release of the information contained in my program records, including, but not limited to, social security number, assessment results and attendance, to the Pennsylvania Department of Education (PDE). Required information for learner participation is indicated with an asterisk (*). This information may include follow-up with employment data and other educational records and will be used, in aggregated or non-personally identifiable form, for reporting as required by state and federal laws. This information may also be used for research and analysis purposes during this year and/or subsequent years. Information provided will remain secure. Unless otherwise noted, only PDE, its authorized contractors or the local program will have exclusive access to this information.

Signature _____ **Date** _____

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Goals	Set Date	Met Date	Not Applicable
<i>High School Equivalency Diploma</i>			<input type="checkbox"/>
<i>Improve basic literacy skills</i>			<input type="checkbox"/>
<i>Improve English Language skills</i>			<input type="checkbox"/>
<i>Reduce or eliminate public assistance</i>			<input type="checkbox"/>
<i>Become a U.S. citizen</i>			<input type="checkbox"/>
<i>Achieve U.S. citizenship skills</i>			<input type="checkbox"/>
<i>Register to vote</i>			<input type="checkbox"/>
<i>Vote for the first time</i>			<input type="checkbox"/>
<i>Increase involvement in community</i>			<input type="checkbox"/>
<i>Volunteer in community</i>			<input type="checkbox"/>
<i>Increase involvement in child(ren)'s education</i>			<input type="checkbox"/>
<i>Help child(ren) more with school work</i>			<input type="checkbox"/>
<i>Increase contact with child(ren)'s teacher</i>			<input type="checkbox"/>
<i>Increase involvement with child(ren)'s school activities</i>			<input type="checkbox"/>
<i>Increase involvement with child(ren)'s literacy activities</i>			<input type="checkbox"/>
<i>Read more to child(ren)</i>			<input type="checkbox"/>
<i>Visit library for or with child(ren)</i>			<input type="checkbox"/>
<i>Purchase books or magazines</i>			<input type="checkbox"/>
<i>Use the library/get a library card</i>			<input type="checkbox"/>
<i>Get a driver's license</i>			<input type="checkbox"/>
<i>Improve health literacy</i>			<input type="checkbox"/>
<i>Improve work skills</i>			<input type="checkbox"/>
<i>Obtain a job-related certificate</i>			<input type="checkbox"/>
<i>Fill out job application</i>			<input type="checkbox"/>
<i>Complete a job interview</i>			<input type="checkbox"/>
<i>Get a better job</i>			<input type="checkbox"/>
<i>Enlist in military</i>			<input type="checkbox"/>

Agency Specific/Adult Specific Outcomes	Set Date	Met Date