

eData Staff Maintenance Intake/Exit

Prefix _____ *First Name _____ Middle Initial _____ *Last Name _____
Suffix _____

*Staff Type Fully Division-Funded Partially Division-Funded Other Funded None

*Volunteer Yes No *Employment Status Full-time Part-time

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

*Ethnicity

*1. Are you Hispanic/Latino? Yes No

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

- American Indian or Alaskan Native
- Black or African American
- White (not Hispanic)
- Asian
- Native Hawaiian or other Pacific Islander

*Sex Male Female

What are your pronouns? (Optional)

- She/her/hers
- He/him/his
- They/their/theirs
- Not listed: _____

What is your gender identity? (Optional)

- Man
- Woman
- Transgender
- Non binary
- Gender non-conforming
- Not listed: _____

*Address 1 _____

Address 2 _____

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

*County _____

Email address _____

Home Phone _____ Call Home Yes No

Cell Phone _____ Call Cell Yes No

Work Phone _____ Extension _____ Call Work Yes No

***Certification** (select all that apply)

- Adult Education K-12 Special Education TESOL No Certification
 Other _____

***Years of Experience in Adult Education** (select one)

- Less than 1 year 1 to 3 years More than 3 years

***Adult Education Start Date** (mm/dd/yyyy) _____

***Education Level**

- No Diploma
- Secondary School
- Diploma/Equivalent
- Some College Courses

- Technical/Business
- School Certificate
- Associate's Degree
- Bachelor's Degree
- Master's Degree
- Doctoral Degree

***Primary Position**

- Administrator
- Adult Educator
- Adult Education
- Paraprofessional
- Case Manager
- Coordinator

- Counselor
- Data Entry/Clerical
- Early Childhood
- Educator
- Early Childhood
- Paraprofessional
- Parent Educator

***Status** Active Inactive Completed

***Start Date for this Agency** (mm/dd/yyyy) _____ **Program Exit Date** (mm/dd/yyyy) _____