



# WATSONVILLE/APTOS/SANTA CRUZ ADULT EDUCATION

## REGISTRATION FORM

AGENCY #				
SITE #				

STUDENT IDENTIFICATION NUMBER

 ADULT    CONCURRENT    H.S.

FIRST NAME	LAST NAME	SOCIAL SECURITY NUMBER	DATE MONTH / DAY / YEAR
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ADDRESS	CITY	ZIP CODE
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E-MAIL ADDRESS	PHONE NUMBER	CELLULAR PHONE NUMBER	MALE <input type="checkbox"/>	BIRTHDATE MONTH / DAY / YEAR
			FEMALE <input type="checkbox"/>	
			NON-BINARY <input type="checkbox"/>	

SECTION NUMBER(S)	COURSE(S)	DAY(S)	TIME(S)	TEACHER	SITE/ROOM #	START/END DATE	FEE(S)

FORM OF PAYMENT:  CASH   CHECK # \_\_\_\_\_    CHECKS OVER \$300    CREDIT CARD   VOUCHER \_\_\_\_\_   RECEIPT# \_\_\_\_\_   DONATION   TOTAL PAID \$ \_\_\_\_\_

HOW DID YOU HEAR ABOUT US:  RETURNING STUDENT    FRIEND/RELATIVE    FLYER/BROCHURE    RADIO AD    INTERNET    ORGANIZATION    OTHER \_\_\_\_\_

EDUCATION: \*HAVE YOU TAKEN CLASSES AT WATSONVILLE/APTOS/SANTA CRUZ ADULT EDUCATION?  YES    NO   \*ARE YOU A CALWORKS PARTICIPANT?  YES    NO

\*ARE YOU ATTENDING HIGH SCHOOL? \_\_\_\_\_ \*GRADE \_\_\_\_\_ (ATTACH A CONCURRENT RELEASE FORM)   \*NAME OF HIGH SCHOOL YOU ATTEND? \_\_\_\_\_

\*TOTAL NUMBER OF YEARS OF SCHOOL COMPLETED (INPUT HIGHEST GRADE COMPLETED) \_\_\_\_\_    IEP

\*HIGHEST DIPLOMA OR DEGREE EARNED:  NONE    HSE-GED/HISET    HS DIPLOMA    TECHNICAL CERTIFICATE    AA/AS DEGREE    BA/BS DEGREE    GRADUATE STUDIES

4YR COLLEGE GRAD    SOME COLLEGE, NO DEGREE    DEGREE HIGHER THAN BA/BS: \_\_\_\_\_    OTHER DIPLOMA/DEGREE \*EARNED IN U.S.  YES    NO

LABOR FORCE STATUS (MARK ONE)	ETHNICITY (MARK ONE)	RACE (MARK ALL THAT APPLIED)	NATIVE LANGUAGE (MARK ONE)
<input type="checkbox"/> EMPLOYED <input type="checkbox"/> UNEMPLOYED <input type="checkbox"/> EMPLOYED WITH NOTICE <input type="checkbox"/> NOT IN LABOR FORCE	<input type="checkbox"/> HISPANIC OR LATINO <input type="checkbox"/> NOT HISPANIC OR LATINO	<input type="checkbox"/> ALASKA NATIVE <input type="checkbox"/> AMERICAN INDIAN <input type="checkbox"/> ASIAN <input type="checkbox"/> BLACK OR AFRICAN AMERICAN <input type="checkbox"/> HAWAIIAN NATIVE OR PACIFIC ISLANDER	<input type="checkbox"/> FILIPINO <input type="checkbox"/> WHITE <input type="checkbox"/> OTHER _____ <input type="checkbox"/> CAMBODIAN <input type="checkbox"/> HONGKONG <input type="checkbox"/> TAGALOG <input type="checkbox"/> CHINESE <input type="checkbox"/> KOREAN <input type="checkbox"/> VIETNAMESE <input type="checkbox"/> ENGLISH <input type="checkbox"/> RUSSIAN <input type="checkbox"/> OTHER _____ <input type="checkbox"/> FARSI <input type="checkbox"/> SPANISH _____

INSTRUCTIONAL PROGRAM	ATTAINABLE GOAL WITHIN PROGRAM YEAR	PERSONAL STATUS	INSTRUCTIONAL LEVEL				
<input type="checkbox"/> ADULTS WITH DISABILITIES <input type="checkbox"/> ADULTS SUPPORTING K-12 STUDENT SUCCESS <input type="checkbox"/> BASIC SKILLS (ABE) <input type="checkbox"/> CAREER TECHNICAL EDUCATION <input type="checkbox"/> CITIZENSHIP <input type="checkbox"/> CITIZENSHIP - ESL <input type="checkbox"/> ENGLISH AS A SECOND LANGUAGE (ESL) <input type="checkbox"/> GED CERTIFICATE SPANISH <input type="checkbox"/> HSE (GED/HISET) CERTIFICATE ENGLISH <input type="checkbox"/> HIGH SCHOOL DIPLOMA <input type="checkbox"/> WORKFORCE READINESS <input type="checkbox"/> OTHER _____	1 2 (MARK ONE IN EACH COLUMN) <input type="checkbox"/> ENTER COLLEGE OR TRAINING <input type="checkbox"/> SHORT-TERM TRAINING <input type="checkbox"/> FAMILY GOAL <input type="checkbox"/> GET A BETTER JOB <input type="checkbox"/> GET A JOB <input type="checkbox"/> GET OFF TANF OR OTHER PUBLIC ASSISTANCE <input type="checkbox"/> HS DIPLOMA+HSE (GED/HISET) <input type="checkbox"/> IMPROVE BASIC SKILLS <input type="checkbox"/> IMPROVE ENGLISH SKILLS <input type="checkbox"/> MILITARY <input type="checkbox"/> PERSONAL GOAL <input type="checkbox"/> RETAIN JOB <input type="checkbox"/> US CITIZENSHIP <input type="checkbox"/> WORK-BASED PROJECT <input type="checkbox"/> OTHER _____	<input type="checkbox"/> CONCURRENTLY ENROLLED IN K-12 <input type="checkbox"/> DISLOCATED WORKER <input type="checkbox"/> LEARNING DISABILITY <input type="checkbox"/> OTHER PUBLIC ASSISTANCE <input type="checkbox"/> PHYSICAL DISABILITY <input type="checkbox"/> TANF/CALWORKS <input type="checkbox"/> VETERAN <input type="checkbox"/> WIOA, TITLE I <input type="checkbox"/> WIOA, TITLE III <input type="checkbox"/> WIOA, TITLE IV <input type="checkbox"/> OTHER _____  ARE YOU LIMITED ENGLISH PROFICIENT <input type="checkbox"/> YES <input type="checkbox"/> NO LANGUAGE PREFERRED/SPOKEN AT HOME: _____	<b>OFFICE USE ONLY</b> <table border="1"> <tr> <th>ESL</th> <th>BASIC SKILLS (ABE)</th> </tr> <tr> <td> <input type="checkbox"/> BEGINNING LITERACY  <input type="checkbox"/> BEGINNING LOW 1  <input type="checkbox"/> BEGINNING LOW 2  <input type="checkbox"/> BEGINNING HIGH  <input type="checkbox"/> INTERMEDIATE LOW  <input type="checkbox"/> INTERMEDIATE HIGH  <input type="checkbox"/> ADVANCED               </td> <td> <input type="checkbox"/> ABE 3.5 - 7.0                  SCORE _____  <b>ADULT SECONDARY (ASE)</b>  <input type="checkbox"/> ASE LOW (BELOW 6.5-8.9)  <input type="checkbox"/> ASE HIGH (8.12)                  SCORE _____               </td> </tr> </table>	ESL	BASIC SKILLS (ABE)	<input type="checkbox"/> BEGINNING LITERACY <input type="checkbox"/> BEGINNING LOW 1 <input type="checkbox"/> BEGINNING LOW 2 <input type="checkbox"/> BEGINNING HIGH <input type="checkbox"/> INTERMEDIATE LOW <input type="checkbox"/> INTERMEDIATE HIGH <input type="checkbox"/> ADVANCED	<input type="checkbox"/> ABE 3.5 - 7.0 SCORE _____ <b>ADULT SECONDARY (ASE)</b> <input type="checkbox"/> ASE LOW (BELOW 6.5-8.9) <input type="checkbox"/> ASE HIGH (8.12) SCORE _____
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SPECIAL PROGRAMS (MARK ONE)	EMPLOYMENT BARRIERS (MARK ALL THAT APPLY OR LEAVE BLANK)
<input type="checkbox"/> ALTERNATIVE EDUCATION (K-12) <input type="checkbox"/> BUREAU OF INDIAN AFFAIRS (BIA) <input type="checkbox"/> COMMUNITY CORRECTIONS <input type="checkbox"/> DISTANCE LEARNING <input type="checkbox"/> EL CIVICS (IELCE) <input type="checkbox"/> EL NAVIGATOR <input type="checkbox"/> EVEN START <input type="checkbox"/> FAMILY LITERACY <input type="checkbox"/> HOMELESS PROGRAM <input type="checkbox"/> INTEGRATED EDUCATION AND TRAINING <input type="checkbox"/> NON-TRADITIONAL TRAINING <input type="checkbox"/> OLDER ADULTS <input type="checkbox"/> SPECIAL ADULTS <input type="checkbox"/> STATE CORRECTIONS <input type="checkbox"/> SUPPLEMENTAL SECURITY INCOME (SSI) <input type="checkbox"/> WORKPLACE EDUCATION <input type="checkbox"/> OTHER _____	<input type="checkbox"/> CULTURAL BARRIERS <input type="checkbox"/> DISABLED <input type="checkbox"/> DISPLACED HOMEMAKER <input type="checkbox"/> ENGLISH LANGUAGE LEARNER <input type="checkbox"/> EX-OFFENDER <input type="checkbox"/> FOSTER CARE YOUTH <input type="checkbox"/> HOMELESS <input type="checkbox"/> LONG-TERM UNEMPLOYED <input type="checkbox"/> LOW INCOME * <input type="checkbox"/> LOW LEVEL OF LITERACY <input type="checkbox"/> MIGRANT AND SEASONAL FARMWORKER <input type="checkbox"/> SEASONAL FARMWORKER <input type="checkbox"/> SINGLE PARENT <input type="checkbox"/> NO TANF/CALWORKS WITHIN 2 YEARS  * LOW INCOME MEANS AN ADULT WHO IS ELIGIBLE FOR ECONOMIC PUBLIC ASSISTANCE OR STUDENT FUND AID, OR AN ANNUAL INCOME LEVEL BELOW \$12,140 FOR SINGLE PERSONS, OR \$16,460 PER COUPLE WITH \$4,320 ADDITIONAL PER DEPENDENT.

**EQUAL OPPORTUNITY IS THE LAW**  
 WATSONVILLE/APTOS/SANTA CRUZ ADULT EDUCATION IS AN EQUAL OPPORTUNITY PROVIDER. ACCOMMODATIONS FOR PEOPLE WITH DISABILITIES ARE AVAILABLE UPON REQUEST.

HOLD HARMLESS POLICY	REFUND POLICY
APPLICANT AGREES TO DEFEND, INDEMNIFY AND HOLD HARMLESS THE PAJARO VALLEY UNIFIED SCHOOL DISTRICT, ITS BOARD OF TRUSTEES, OFFICERS, EMPLOYEES AND AGENTS FROM ANY AND ALL LOSSES OR INJURIES ARISING FROM, OR ALLEGEDLY ARISING FROM, THE NEGLIGENCE OF THE APPLICANT, ITS EMPLOYEES AND/OR AGENTS WHILE ATTENDING CLASSES AND/OR CLASS ACTIVITIES.	<b>REGISTRATION FEES CANNOT BE REFUNDED AFTER THE CLASS BEGINS.</b> UPON PRESENTING YOUR RECEIPT AND THE REFUND REQUEST FORM, A CHECK WILL BE MAILED TO YOU WITHIN 6 TO 8 WEEKS. A <b>\$10.00</b> PROCESSING FEE WILL BE CHARGED FOR REFUNDS. TEXTBOOKS AND SUPPLIES ARE NON-REFUNDABLE. THERE IS A <b>\$25.00</b> FEE FOR RETURNED CHECKS.

STUDENT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Registered by: (Signature) \_\_\_\_\_  
 Updated by: (Signature) \_\_\_\_\_

