## Student Data Summary Form

Date Form Completed:

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Last Name:		First Name	2:	Middle Name:		
Maiden Name:		Student En	nail:			
Social Security #:		Date of Birth:				
Address:Stre	eet or PO Box			$\rightarrow$ O		
City:	Sta	ate:	ZIP Code:	County:		
Phone:	Al	ternate Phone:				
Gender: 🗆 Male	□ Female					
Ethnicity:   Lating	o or Hispanic Origin	1				
Race – Select all that	at apply:					
	□ American India	n or Alaskan Native	□ Asian □ B1	ack or African American		
	□ Native Hawaija	n or other Pacific Isla	nder 🗆 White			
Highest School Gra						
C	-	nect One):				
□ No school grades	-		Completed or degree	Completed some college, but did not earn a certificate or degree		
$\Box$ Completed at least part of 1 <sup>st</sup> through 11 <sup>th</sup> grade			-	Career Certificate		
	ompleted:			☐ Earned an Associate of Applied Sciences degree		
Completed the tw diploma or equivale		not attain a		□ Earned an Associate of Science degree		
Earned a high sch			□ Earned an	□ Earned an Associate of Arts degree		
□ Earned a high sch	nool equivalency		□ Earned a E	□ Earned a Bachelor's degree		
□ Have a disability high school certifica completing an Indiv	te of attendance/co	mpletion from	□ Attained b	□ Attained beyond a Bachelor's degree		
Where this level wa	as achieved: 🗆 U.	S. based school	Not U.S. based sch	lool		
Military Status (Se	lect One – For State	e Reporting Purposes	):			
□ Active Duty Pers	onnel		□ Active Me	mber of the Reserves		
Eligible Depende	ent (spouse/child)		□ Veteran (P	□ Veteran (Prior Service, Service Prior to 9/11/2001)		
□ Veteran (Prior Se	ervice, Service Date	s Unknown)	□ Veteran (P	□ Veteran (Prior Service, Service on or after 9/11/2001)		
□ Active Member of	of the National Guar	rd	🗖 No Militar	y History		
Citizenship (For Sta	ate Reporting Purpo	oses):				
□ Non-Resident Ali	ien 🛛 U.S. Cit	izen 🗆 Permane	nt Resident Alien			
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Employment Status: (Select One – To be completed upon entry for each term/semester)

□ Employed □ Not Employed (looking and eligible for employment)

Employed but with Notice of Termination or in transition out of military service

□ Not in Labor Force (incarcerated, not eligible for employment, or not seeking employment)

**Background** (Select all that apply – To be completed upon entry for each term/semester):

The school system and the Florida College System provides services for persons with disabilities. If you need assistance in the course of your studies, please notify a school or college administrator.

□ Youth in Foster Care (including aged-out)

□ Single Parent □ Single Pregnant Woman □ Perceived employment barriers

□ Previously or currently subject to any stage of the criminal justice process

Low-income individual (or their dependent) employed primarily in farming currently unemployed or finding difficulty obtaining work for 12 months out of the last two years

□ Migrant or seasonal farmworker (or their dependent) □ Homeless without a fixed, regular nighttime residence

□ Homeless but staying in non-traditional housing (ex: park, abandoned building, or bus station)

Child of migrants who have changed school districts in the last 3 years due to parents' seasonal employment

□ Previously unemployed or underemployed while caring for home and family (unpaid)

□ Previously supported by public assistance or family, and now unemployed or underemployed

□ Parent of a child within two years of no longer receiving TANF (formerly AFDC)

Unemployed dependent spouse of a member of the Armed Forces on active duty or is deceased or disabled as a result of military service

**Income Status** (Select all that apply – To be completed upon entry for each term/semester):

□ Student currently eligible to receive Temporary Assistance for Needy Families (TANF) under Part A Title IV of the Social Security Act, however the student's eligibility will be exhausted within two years of current reporting year

□ Student has been unemployed for 27 weeks or more at the time of entry in the current reporting year

□ Student self-identifies as having a low income at the time of entry in the current reporting year under any of the following:

- Student or immediate family receive benefits under Supplemental Nutritional Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), Supplemental Security Income (SSI), or other state public assistance
- Total family income does not exceed the higher of the poverty line or 70% of the lower living standard income level
- Student is current in a foster program
- Student has a disability and has personal income at or below the poverty line, regardless of family income
- Student is a youth living in a high-poverty area

This Section to be Completed by Adult General Education Agency									
Enrollment	Date: _	Separation Date:							
Signed Release of Information on File:  U Yes No									
<b>Program Enrollment Type</b> – Select all that apply:									
$\Box$ A	BE	ESOL       ASE (AHS, High School Equivalency Program)							
		If Adult High School, indicate the diploma program:							
		□ 18 credit ACCEL HS diploma (s. 1002.3105 F.S.) □ 24 credit HS diploma (s. 1003.4282 F.S.)							
Institutional Programs:									
Correctional Facility Community Correctional Program Other Institutional Settings									
Assessment – Pretest within first 12 hours of instruction									
Assessment name: Date:									
			Scale						
	Form	Level	Scores	1	Class Information				
Reading					□ Online Asynchronous				
Math					Class Site:				
Language					Expected Attendance Hours/Dates (Weekly/Monthly):				
Listening									
	•								