

# Student Data Summary Form

Date Form Completed:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Maiden Name: \_\_\_\_\_ Student Email: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or PO Box

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_ County: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Gender:  Male  Female

Ethnicity:  Latino or Hispanic

Origin Race – Select all that apply:

American Indian or Alaskan Native  Asian  Black or African American

Native Hawaiian or other Pacific Islander  White

Highest School Grade Completed (Select One):

- |  |   |
|--|---|
| <input type="checkbox"/> No school grades completed  | <input type="checkbox"/> Completed some college, but did not earn a certificate or degree |
| <input type="checkbox"/> Completed at least part of 1 <sup>st</sup> through 11 <sup>th</sup> grade<br>Highest grade completed: _____   | <input type="checkbox"/> Earned a Career Certificate                                      |
| <input type="checkbox"/> Completed the twelfth grade, but did not attain a diploma or equivalency  | <input type="checkbox"/> Earned an Associate of Applied Sciences degree                   |
| <input type="checkbox"/> Earned a high school diploma  | <input type="checkbox"/> Earned an Associate of Science degree                            |
| <input type="checkbox"/> Earned a high school equivalency  | <input type="checkbox"/> Earned an Associate of Arts degree                               |
| <input type="checkbox"/> Have a disability and attained a special diploma or high school certificate of attendance/completion from completing an Individual Education Plan (IEP) | <input type="checkbox"/> Earned a Bachelor's degree                                       |
|  | <input type="checkbox"/> Attained beyond a Bachelor's degree                              |

Where this level was achieved:  U.S. based school  Not U.S. based school

Employment Status: (Select One – To be completed upon entry for each term/semester)

- Employed
- Employed but with Notice of Termination or in transition out of military service
- Not Employed (looking and eligible for employment)
- 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

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**This Section to be Completed by Adult General Education Agency**

**Enrollment Date:** \_\_\_\_\_

**Separation Date:** \_\_\_\_\_

**Signed Release of Information on File:**    Yes  No

**Program Enrollment Type** – Select all that apply:

- ABE    ESOL    ASE (AHS, High School Equivalency Program)

**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

|           |  |  |  |
|-----------|--|--|--|
| Reading   |  |  |  |
| Math      |  |  |  |
| Language  |  |  |  |
| Listening |  |  |  |

|   |
|---|
| <p><b>Class Information</b></p> <p><input type="checkbox"/> Distance Education</p> <p><b>Class Site:</b> _____</p> <p><b>Expected Attendance Hours/Dates</b><br/>(Weekly/Monthly):</p> <p>_____</p> |
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**12-F: Student Data Summary/Screen-Shot  
Data Collection Requirements for NRS Reporting**

The **required Basic Student Information** data elements listed on this form must be included on your agency's Student Data Summary Form or Screen-Shot. Programs may collect additional data but these data elements must be collected for federal NRS reporting. Please see the appropriate data handbooks for additional details on the specific reporting requirements.

If your agency does not have a Student Data Summary Form or Screen-Shot, you may use the **Example Student Intake Form** found on the website at: <http://www.fldoe.org/academics/career-adult-edu/funding-opportunities/>.

The form used by your agency must also be used by any sub-contracted service providers of your agency.

| <b>STUDENT DATA SUMMARY FORM ELEMENTS</b>  |  |
|--|--|
| <b>Basic Student Information</b>   |  |
| <p><b><u>Required</u></b><br/>           Name<br/>           Address<br/>           Phone<br/>           Email (for on line access)<br/>           Date of Birth<br/>           Enrollment date<br/>           Separation date<br/>           Signed Release of Information on File<br/>           Gender<br/>           Race<br/>           Ethnicity<br/>           SSN (If available)</p> <p><b><u>Assessment Data</u></b><br/>           Test Name<br/>           Test Form<br/>           Test Level<br/>           Test Date<br/>           Test Score</p> | <p><b><u>Background Data</u></b><br/>           Youth in Foster Care<br/>           Single Parent/Pregnant<br/>           Employment Barriers<br/>           Ex-offender<br/>           Low Income<br/>           Migrant or Seasonal Worker or Dependent<br/>           Homeless<br/>           Displaced Homemaker<br/>           On Public Assistance<br/>           Highest School Grade Completed<br/>           Location of Schooling<br/>           Employment Status</p> |
| <b>Institutional Programs</b><br>(if applicable)   | <b>Program type</b><br>(student <u>must</u> select all that apply)   |
| Correctional Facility<br>Community Correctional Program<br>Other Institutional Setting   | ABE<br>Adult Secondary Education (AHS, HSED)<br>ESOL<br>Attendance Hours   |