

**NH Adult Education
Northumberland Adult Diploma Program
Student Intake Form 2021-2022**

Intake Date

Last Name First Name
Middle Name Nickname

Address
City State Zip
Phone Text Yes No
Email Address

Date of Birth
Gender Male Female
Country of Birth

Are you Hispanic/Latino Yes No

What is your race? Choose all that apply.
 American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White

Last grade level completed

8	9	10	11	12										
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Last School Attended

Where did you complete your schooling? In the US Outside of the US

Do you have a high school diploma or equivalent? Yes No

Do you have a college degree or training certificate? Yes No

Name of University/College

Are you currently working? Yes No
If yes Full time Part time

Name of Company or industry Hours per week

If no I am looking for work.
 I am not looking for work.

Emergency Contact: Who can we call for you in case of emergency?

Name Phone Number

Relationship to student:

FOR OFFICE USE ONLY

Funding Stream Title II Dual Enrolled

FOR DUALY ENROLLED STUDENTS ONLY

Are you still enrolled in school?

Yes No

If yes,

Do you have an alternative learning plan? Yes No

Who is your school counselor?

If no,

Are you home-schooled? Yes No

What type of diploma are you hoping to earn?

- Regular high school diploma
- Adult high school diploma
- High school equivalency certificate (take the HiSet exam)
- Unsure

Parent/Guardian Information

GUARDIAN #1

Last Name	<input type="text"/>	First Name	<input type="text"/>
Middle Name	<input type="text"/>	Nickname	<input type="text"/>

Address	<input type="text"/>				
City	<input type="text"/>	State	<input type="text"/>	Zip	<input type="text"/>
Phone	<input type="text"/>	Text	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Email Address	<input type="text"/>				

GUARDIAN #2

Last Name	<input type="text"/>	First Name	<input type="text"/>
Middle Name	<input type="text"/>	Nickname	<input type="text"/>

Address	<input type="text"/>				
City	<input type="text"/>	State	<input type="text"/>	Zip	<input type="text"/>
Phone	<input type="text"/>	Text	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Email Address	<input type="text"/>				

For Office Use Only

Starting Carnegie Credits	<input type="text"/>
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Privacy Policy and Statement of Confidentiality

I understand that my information will be treated as confidential and used only for educational purposes. It will be seen only by education staff members who are required to treat all student information as private.

Signature Date

Data Collection Requirements

This adult education center receives funding from the State, Federal and local resources. These resources make this Adult Education & Literacy program free for you to attend. In order for us to continue to receive funding, we need to show that the services we provide are helping our students to build their academic skills, to move into postsecondary education and training to improve their lives, and to get and keep employment that supports their families.

So after you leave this program, we need to find out how you are doing. If you provide a social security number, we can use it to match records of people who are working or use your name and date of birth to match records of people who are in college.

We can also get this information by calling you or sending you an email or text after you leave, so it is important that we have your up-to-date contact information including an email address, mailing address and phone number.

Please check off which method of communication is your 1st choice and which is your 2nd choice for us contacting you after you leave the program.

Phone Email Postal Letter

I understand that as a Federal and State requirement of attending this class, I will be contacted twice as a follow-up at 6 months and 12 months after leaving this program.

Signature Date

Attachments (check of applicable)

<input type="checkbox"/>	Voluntary Authorization to Share Social Security Number
<input type="checkbox"/>	Revocation for Release of Information (provide for future use as needed)
<input type="checkbox"/>	NH Works Release of Information (for co-enrolled students)
<input type="checkbox"/>	General Release of Information
<input type="checkbox"/>	
<input type="checkbox"/>	

VOLUNTARY AUTHORIZATION TO SHARE SOCIAL SECURITY NUMBER

Name of Agency:

This form allows the agency listed above to collect your Social Security Number and share it with the NH Department of Education. The NH Department of Education will only use this information for data matching for federal WIOA reporting and for educational research.

Completing and signing the form below allows the NH Department of Education to collect and release student information as described below, for the purpose described below.

Specific Information to be released:

- Personal Identifiable Information (PII)
 - Name
 - Address
 - Birth date
 - Social Security Number
- Education Information
 - Educational records
 - Test results
 - Attendance

If you sign this form indicating authorization to release your information, your information will be shared with WIOA partners including, but not limited to,

- NH Unemployment Insurance System (SSN only, not your name)
- State Wage Information System (SSN only, not your name)
- National Student Clearinghouse (Name and DOB only)

PLEASE READ THE FOLLOWING CAREFULLY

I understand that I do NOT need to provide a Social Security Number to take classes at this agency.

Student Name (Print): _____

- YES. I voluntarily provide my Social Security Number.
- NO. I choose not to provide a Social Security Number.

Student Signature


Date



NOTE TO STAFF

Cut and shred SSN after it has been entered into the LACES Data System.

My Social Security Number is: _____ - _____ - _____

<p>NH Employment Security Employment Services Unemployment Insurance Benefits Trade Act Program WorkNowNH Reentry Program Migrant & Seasonal Farmworker Program New England Farm Workers Council</p> <p>NH Department of Education Adult Education Vocational Rehabilitation</p> <p>NH Department of Health and Human Services TANF SNAP NHEP</p> <p>Office of Workforce Opportunity/Community Action Agencies WIOA Youth WIOA Adult SCSEP</p> <p>Community College System of New Hampshire WorkReady NH Apprenticeship NH Community College</p> <p>NH Job Corps Operation Able</p> <p>Veterans' Services Harbor Homes Northeast Veterans Outreach Center Veterans Inc. U.S. Department of Veterans Affairs Vocational Rehabilitation and Employment</p> <p>Please see back of form for additional information about the programs listed above.</p>	<p>NH WORKS System Partners Release of Information</p> <p>This form is valid for two years from participant's signature date</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 30%; border: none;">I,</td> <td style="width: 40%; border: none;"></td> <td style="width: 30%; border: none;">, authorize</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;">to exchange</td> </tr> </table> <p>(individual or agency) information relating to prior assessment(s) for training and employment including but not limited to: work history, vocational assessments, career planning, documentation related to eligibility, skills, training, quarterly wage data, and Unemployment Compensation benefits with the agency (ies) listed on the left side of this form.</p> <p>This Release of Information does not authorize the disclosure of any medical information or any other restricted third party information.</p> <p>I understand that this information may be used to determine eligibility for employment and training services, assist in the development of my individual training plan for education and employment, career planning, and/or may be used for statistical purposes.</p> <p>I allow the NH Works System Partners listed on the left to release to each other the requested information when I am referred to partner services. I understand the information will be used only on an as needed basis and will remain confidential, to the extent required and/or permitted by law. This information cannot be shared with any other entity without my written permission.</p> <p>A copy of this Release of Information is as valid as the original. This Release is valid for both program and follow-up services.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">_____</td> <td style="width: 40%; border: none;">_____</td> </tr> <tr> <td style="border: none;">Participant's Signature</td> <td style="border: none;">Date</td> </tr> <tr> <td colspan="2" style="border: none;">_____</td> </tr> <tr> <td colspan="2" style="border: none;">Guardian's Signature if applicable</td> </tr> <tr> <td colspan="2" style="border: none;">_____</td> </tr> <tr> <td style="width: 60%; border: none;">Staff Signature</td> <td style="width: 40%; border: none;">Email Address</td> </tr> </table> <div style="text-align: center; margin-top: 20px;"> <p>A proud partner of the</p>  </div>	I,		, authorize			to exchange	_____	_____	Participant's Signature	Date	_____		Guardian's Signature if applicable		_____		Staff Signature	Email Address
I,		, authorize																	
		to exchange																	
_____	_____																		
Participant's Signature	Date																		

Guardian's Signature if applicable																			

Staff Signature	Email Address																		

PLEASE KEEP THIS PAGE FOR YOUR RECORDS

SYSTEM PARTNERS/PROGRAM SERVICES

NH EMPLOYMENT SECURITY –A free public Employment Service, which benefits the job seeker, the employer, and the economy by helping people find work through work search programs, employment information, and economic and labor market information. <https://www.nhes.nh.gov/>

- Employment Services
- Unemployment Insurance Benefits
- Trade Act Program
- Migrant and Seasonal Farmworker Program
- WorkNowNH

DEPARTMENT OF HEALTH AND HUMAN SERVICES - <https://www.dhhs.nh.gov/>

- **TANF**– Cash Assistance provides assistance to needy families with dependent children
- **FOODSTAMPS** – Supplemental Nutrition Assistance Program
- **NHEP** –Employment support program that provides cash assistance to eligible able-bodied parents and assists them in becoming self-sufficient.

NH DEPARTMENT OF EDUCATION- <https://www.education.nh.gov/>

- **ADULT EDUCATION** - Provides a variety of educational opportunities to empower adults to become lifelong learners, to support individuals in identifying and achieving academic and/or career goals.
- **VOCATIONAL REHABILITATION** – Assists eligible NH citizens with disabilities to secure competitive integrated employment and financial and personal independence by providing rehabilitation services.

OFFICE OF WORKFORCE OPPORTUNITY- Serves as the state administered entity for the Workforce Innovation and Opportunity Act. <https://www.nhworks.org/>

- **WIOA Youth Program** – Provides academic and work based learning services to youth with the goal of self-sufficiency.
- **WIOA Adult Program** – Provides economically disadvantaged adults access to employment, education, training and support services to succeed in the labor market and obtain self-sufficiency.
- **WIOA Dislocated Worker Program**- Provides laid off workers access to employment, training and support services to succeed in the labor market and obtain self-sufficiency.
- **SCSEP** –Community Service and Work-based training program for older workers. Provides job training and placement to those 55 or older.

COMMUNITY COLLEGE SYSTEM OF NH – The seven NH community colleges offer associate's degree, certificate and skill based programs that provide opportunities for college education and career training.

<https://www.ccsnh.edu/>

- **Work Ready NH**-Tuition free workforce development program tailored to meet the needs of job seekers and career builders as well as provide training in the specific skills employers are seeking in their current and future employees.
- **ApprenticeshipNH**- Program supports the development of new registered apprenticeship programs and in healthcare, advanced manufacturing, hospitality and construction and infrastructure sectors. Registered apprenticeship is an employer driven model which combines on the job training and related classroom instruction to increase an apprentice's skill level and wages. <http://www.EarnLearnNH.org>

NH JOB CORPS- A tuition free training and education program that connects young adults to the skills and educational opportunities needed to establish a career. <https://newhampshire.jobcorps.gov/>

OPERATION ABLE- Older Worker program that empowers older workers with job skills supports and training services to re-enter the workforce. <https://operationable.net/staff>