

Member #: _____



PROSPECTIVE LEARNER INFORMATION FORM

MR./MRS./MS. _____
Last Name First Name Initial

ADDRESS _____

BIRTH DATE _____ PHONE NUMBER _____ WORK _____

INTERVIEWED BY _____ S.S # _____

NUMBER IN HOUSEHOLD _____ EMAIL _____

HOW DID YOU HEAR ABOUT US?

☐ Family ☐ Telephone Call ☐ I am a returning learner
☐ Friend ☐ Center's Sign ☐ Other _____
☐ Website ☐ Attorney or Agency

ASSISTANCE PROGRAMS

☐ TANF (Texas Assistance to Needy Families) ☐ Veteran's Compensation ☐ Day Care Voucher
☐ SSI (Supplemental Security Income) ☐ Food Stamps ☐ School Lunch
☐ SSDI (Social Security Disability Insurance) ☐ General Assistance ☐ Medicaid

EMPLOYMENT STATUS:

☐ Employed ☐ Retired
☐ Unemployed ☐ Student
☐ Public Assistance ☐ Social Security

HOME LANGUAGE _____ TOTAL INCOME FOR HOUSEHOLD \$ _____

PREFERRED CLASS DAYS & TIMES

☐ Morning ☐ Afternoon ☐ Evening
☐ Mon. ☐ Tue. ☐ Wed. ☐ Thur. ☐ Fri.

TYPE OF LEARNER

☐ ABE ☐ Citizenship ☐ HSE
☐ Barton ☐ ESL ☐ Employment Preparation/Job
Readiness

HAVE YOU ATTENDED ANOTHER SCHOOL? Y___ or N___ IF YES, NAME OF SCHOOL _____

Revised 03.25.2020

Please email complete form to admin@adulthoodeducationcentertexas.org. To request a reasonable accomodation, email reasonableaccommodations@adulthoodeducationcentertexas.org.