



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 reasonableaccomodations@adulthoodeducationcentertexas.org.