

WVAdultEd Student Profile

Completion of these sections / items of the **paper Student Profile is mandatory** and **MUST be maintained in the individual student folders**.
Once completed, all information must be **entered in AEMIS by Tuesday for the previous week**, per the program assurances/grant award.

The following information is to be completed by, or obtained directly from, the student.

Details:

NOTE Utilize the student's name as it appears on the social security card.

First Name: _____ Last Name: _____

Middle Name: _____ Maiden Name: _____

Gender: Female Male Email: _____

Social Security Number: _____-_____-_____ Date of Birth (MMDDYYYY): ____/____/____

Ethnicities: White American Indian or Alaska Native Asian
(select all that apply): Black / African American Native Hawaiian / Other Pacific Islander Hispanic / Latino

Contact Information:

Primary Mailing Address: _____
Street / PO Box City State County of Residence Zip

Mailing Address: _____
(optional) Street / PO Box City State Zip

Street Address: _____
(optional) Street City State Zip

Phones: Primary: _____-_____-_____ Home: _____-_____-_____
(optional) Work: _____-_____-_____ Work Fax: _____-_____-_____ Mobile: _____-_____-_____

Student General Release of Information

The West Virginia Adult Education (WVAdultEd) program pursuant to WV Code 18-2-5h (Student Data Accessibility, Transparency and Accountability Act) authorizes this organization to ask you to provide your social security number. The number will be used for keeping records, research on students in general, and summary reporting. Your number also will be provided to the WVAdultEd Data Collection unit. This unit gathers information about students and programs to meet state (WV Code 18-2-5h) and federal (OMB Control Number 1205-0526) reporting requirements. It also helps to plan, research, and develop programs. This information helps to support the progress of students and their success in the workplace and other educational programs. When conducting research, your social security number will only be disclosed in a manner that does not permit personal identification. Your social security number will never be used to report personal information. By providing your social security number, you are consenting to these uses as identified. Provision of your social security number and consent to its use is not required; and, if you choose not to do so, you will not be denied any right, benefit, or privilege provided by law. You may revoke your consent, in writing, for the use of your social security number at any time. I agree that the information contained on the WVAdultEd Student Profile is correct, to the best of my ability.

Printed Student Name as it appears on SSN card **Signature of Student** **Date**

Printed Name of Guardian if applicable **Signature of Guardian** **Date**

The following information is to be completed by WVAdultEd Personnel.

Signed Release of Information on File (valid until withdrawn in writing by the student) **WVAdultEd Technology Use Policy**
- if student chooses not to disclose SSN or withdraws release of SSN later, remove the SSN in AEMIS)

Referral Source - How did student hear about program (select one—prior to the 12th instructional hour)

WorkForce WV HRDF/ROSS (out of school youth) WVAdultEd 800 number Internet / Media CTE
 Voc Rehab / DRS Judicial System Military / Recruiter Friend / Family High School / Home School
 DHHR Library / Literacy Volunteers Senior Center Employer Higher Education
 Attended before: Where _____ Approximate Date (MMDDYYYY): ____/____/____
 Other, specify _____

Disability Screening (select one):

Screening Questions (3 questions) WV Learning Needs Screening (30 questions)

Misdemeanor **Division of Corrections (DOC) Number:** _____ **Date Released (mmddyyyy):** _____

Student's Primary Learning Style(s): (select all that apply based upon the completed Learning Needs Inventory)

Visual – Language Visual – Numerical Auditory – Language Auditory – Numerical Social – Individual
 Expressive – Oral Expressive – Written Auditory/Visual/Kinesthetic Social – Group

May 1, 2018 / LM

Note: To be completed by WVAdultEd Personnel ONLY
Note: The information on these two pages, as well as the assessment page, MUST be collected AND logged prior to the 12th instructional hour for "each" period of participation (POP). A new POP will begin when a student has no attendance logged for 90 calendar days and this information / form MUST be completed again and maintained in the individual student files.

First Name: _____ Last Name: _____ POP Date: _____ - _____

Age at Entry: _____ (auto calculated by AEMIS)

Program of Study: (select one)

- HSE Completion
- EFL Completion, leading to employment
- EFL Completion, leading to an industry-recognized certificate or certification (credential)

Educated in US: Yes No

Self-Diagnosed Impairment:

Self-Limiting Belief:

Does the student feel s/he has any "disability", as defined in Section 3(2)(a) of the American Disabilities Act of 1990 (42 U.S.C. 12102)? Under that definition, a "disability" is a physical or mental impairment that substantially limits one or more of the person's major life activities. (i.e. deaf, blind, limited mobility, intellectual disability, autism, epilepsy, diabetes, active cancer, HIV, bipolar disorder)¹

- Yes No Did not self-identify
- Yes, and the **student's** yearly income is \$12,060 or below

¹ https://www.eeoc.gov/laws/regulations/adaaa_fact_sheet.cfm

Does the student feel s/he possess attitudes, beliefs, customs or practices that influence a way of thinking, acting or working that may serve as a hindrance to employment?

- Yes No Did not self-identify

Ex-Offender

Yes (Student has been subject to any state of the criminal justice process or requires assistance in overcoming barrier to employment resulting from a record of arrest or conviction)

Status:

No (Select "no" if did not disclose)

Education Upon Entry: Highest Education Level Completed (i.e. last grade completed – select one upon entry):

- Less than a high school diploma or high school equivalency
 _____ Indicate *last grade completed* (Grades 1-12)
- Attained high school diploma (HSD)
- Attained a high school equivalency (HSE)
- Students w/a disability received a certificate of attendance/completion as a result of successfully completing an Individual Ed Plan (IEP)
- Some postsecondary education (no degree)
- Attained postsecondary technical or vocational certificate (non-degree)
- Attained an Associate degree
- Attained a Bachelor degree
- Attained a degree beyond a Bachelor's degree
- No Schooling
- Unknown

Employment Status: (select one upon entry)

- Employed - Includes self-employed
 - Employed, but received Notice of Termination of Employment or Military Separation is pending
 - Received a notice of termination of employment or been issued a Worker Adjustment and Retraining Notification (WARN) or other notice that the facility or business will close
 - Within 12 months of separation from Military or 24 months of retirement from Military
 - Not in Labor Force - Students who are not employed and not actively looking for work or incarcerated
 - Unemployed, in Labor Force - Seeking employment - Available for work - Makes specific efforts to seek employment
- Last day of employment (MMDDYYYY): _____ Unemployed for ≥ 27 weeks (auto calculated by AEMIS)
 - input 01/01/1916 if in labor force but has no previous work experience

School Status: (select one upon entry)

- Not attending school or HS Dropout
- Not attending school; HS Diploma or HSE
- In-school; Postsecondary School (full- or part-time)
- Not attending school; Student is 16 years-of-age (select ONE):
 - Youth emancipated from parents (requires copy of court documentation in student file)
 - Married (requires copy of marriage certificate in student file)
 - Enrolled in institutional education program (OIEP)
 - Court-ordered (requires copy of court-order in student file)
- Student does NOT have a high school diploma AND is 17 to 18 years-of-age (requires official withdraw letter):
 Date of withdraw from school (mmddyyyy): _____ / _____ / _____

First Name: _____ Last Name: _____ POP Date: _____ - _____

Benefits at Entry: (upon entry or 6 months prior to specified period of participation)

- SNAP
- TANF/WV WORKS
- WIC
- Child Care Resource and Referral agencies
- WV CHIP
- Disabled Assistance (LIHEAP, etc.)
- Medicaid
- Supplemental SSI under Title XVI
- Emergency Assistance Program (EAP)
- Other state or local income based public assistance, specify _____
- School Clothing Allowance (SCA)

NOTE: For additional details regarding Benefits, go to <http://tinyurl.com/WVAssistance>

If no items are selected above: (select one):

# in household	Non-metropolitan	Metropolitan*	Lives in Berkeley or Jefferson County
<input type="checkbox"/> 1	\$12,060 or less	\$12,060 or less	\$11,060 or less
<input type="checkbox"/> 2	16,240 or less	16,240 or less	19,045 or less
<input type="checkbox"/> 3	20,420 or less	20,727 or less	26,142 or less
<input type="checkbox"/> 4	25,197 or less	25,588 or less	32,268 or less
<input type="checkbox"/> 5	29,734 or less	30,201 or less	38,084 or less
<input type="checkbox"/> 6	34,773 or less	35,321 or less	44,539 or less
<input type="checkbox"/> 7	39,812 or less	40,441 or less	50,994 or less
<input type="checkbox"/> 8	44,851 or less	45,561 or less	57,449 or less
<input type="checkbox"/> Specify: _____	\$ _____	\$ _____	\$ _____
	Add \$5,039*	Add \$5,120*	Add \$6,455*

* Add for each additional household member above eight

Household income exceeds all of the above categories

* Lives in Kanawha, Putnam, Cabell, Wayne, Mineral, Wood, Brooke, Hancock, Marshall, or Ohio County

Student Status at Entry:

- Not Applicable
- ELL (English Language Learner)
- Homeless / Runaway Youth (Lacks a fixed, regular, and adequate nighttime residence / Is 16-18 years of age and absents himself or herself from home or place of legal residence without permission of his or her family)
- Single parent (Is single, separated, divorced or a widowed individual who has primary responsibility for 1+ dependent children under age 18, **including single pregnant women**)
- Displaced Homemaker – Select if the following is true:
 - 1) Has been dependent on the income of another family member and is no longer supported by that income; or
 - 2) Dependent spouse of the Armed Forces on active duty AND income is significantly reduced due to deployment; or
 - 3) Dependent spouse of the Armed Forces whose income is reduced due a service-connected death or disability of the member
- AND**
Unemployed or underemployed experiencing difficulty obtaining or upgrading employment - **Note:** Underemployed=Labor that falls under the **underemployment** classification includes those workers that are highly skilled but working in low paying jobs, workers that are highly skilled but work in low skill jobs and part-time workers that would prefer to be full-time.
- Seasonal Farmworker (Income is at or below \$11,880 and for the 12 consecutive months out of the 24 months prior to application/entry for the program, has been primarily employed in agriculture or fish farming labor that is characterized by chronic unemployment or underemployment and faces multiple barriers to economic self-sufficiency)
- Migrant and Seasonal Farmworker (Farmworker whose agricultural labor requires travel to a job site that the s/he is unable to return to a permanent place of residence within the same day)
- 16-17 year old in foster care OR 18-24 year old who has aged out of foster care
- Exhausting TANF within 2 year upon entry date

Student Types During POP (while enrolled):

- IET (Integrated Education and Training)
- Documented Disability (requires confidential student file)
- Work Release/Day Report
- VocRehab/DRS (receiving VocRehab services)
- WorkForce WV (enrolled in training through Workforce WV)
- Higher Ed (enrolled in post-secondary ed)
- Distance Learner
- Veteran (student served on U.S. active duty in the armed forces and discharged/released under conditions other than dishonorable)
- Not Applicable
- Maintain Driver's License
- DHHR (receiving services via DHHR)
- CTE (enrolled in Career and Technical Ed)
- Court-ordered (requires copy of court order and confidential student file)
- Workplace (classes located @ worksite targeting employability skills)
- Adult Career Pathway
- ELL
- IEL/Civics Ed
- ODTP (enrolled in AdultEd via ODTP)

**WVAdultEd Period of Participation
NRS Approved Assessments**
(To be completed by WVAdultEd Personnel)

First Name: _____ Last Name: _____ POP Date: _____ - _____

For entry into AEMIS

	Focus	Locator Date*	Assessment Date	Method	Type	Title	Level	Form	Raw Score	Grade Level	EFL
Entry											
Entry											
Entry											

**applicable for TABE assessments only*

First Name: _____ Last Name: _____ POP Date: _____ - _____

TRA – “Not” to be entered in AEMIS

Subject	Form	Date	Score		Subject	Form	Date	Score

HSE – “Not” to be entered in AEMIS

Content Area	Date Passed
Mathematics	
Reading	
Science	
Social Studies	
Writing	
Credential Date	

WVAdultEd Student Achievements and Reason for Exit
(To be completed by WVAdultEd Personnel)

First Name: _____ **Last Name:** _____ **POP Date:** _____ - _____

Reasons for Exit from POP: (select one upon withdraw / exit from the POP)

- Institutionalized (participant has become a 24-hour resident of a correctional institution or other facility such as a hospital or treatment center)
- Health / Medical (exit due to medical treatment and that treatment is expected to last longer than 90 calendar days)
- Deceased
- Reserve Forces called to Active Duty for at least 90 calendar days
- Foster Care (16 to 17-year-old, that is in Foster Care and left the area and exits because s/he has moved from the area as part of such a program or system)
- Criminal Offender (select if the participant is a criminal offender in a correctional institution)
- Participant Meets None of the Above Conditions

Achievements

INDUSTRY RECOGNIZED CREDENTIALS*

- ____/____/____ Microsoft Office Certification
(Select all that apply)
- Word Specialist Word Expert
 - Excel Specialist Excel Expert
 - PowerPoint Specialist Access Specialist
 - Outlook Specialist MOS Master
- ____/____/____ Adobe Certified Associate Certification
(Select all that apply)
- Flash Illustrator InDesign
 - Premier Pro Photoshop Dreamweaver
- ____/____/____ Completed CTE, receiving credential;
specify credential(s): Note: OSHA is not recognized by WIOA as an industry recognized credential

- ____/____/____ Associate's Degree;
- ____/____/____ Bachelor's Degree
- ____/____/____ Master's Degree
- ____/____/____ National Career Readiness Certificate
(Select all that apply)
- Platinum Gold Silver Bronze
- ____/____/____ Intuit QuickBooks Certification
- ____/____/____ HSE Credential Note: Official documentation MUST be maintained in the individual student folder.
- *If selected, documentation MUST be in the student's permanent file
Achievement date MUST be date credential was earned.*

EDUCATIONAL

- ____/____/____ Increased level gain(s), completed a module, or mastered a CSO(s) while utilizing a Learning Management System in any assessment area:
Select all that apply
- Edgenuity Burlington English
 - Skillstutor Computer Essentials
 - WIN Other
 - TASC Academy
- ____/____/____ Completed entire vocational / assessment battery / test (i.e. Reading, Math, Listening/Speaking for ELL; Citizenship, Listening/Speaking for IEL/Civics Ed; Reading, Math, Lg for TABE and CASAS)
- ____/____/____ Completed High School Equivalency Readiness Assessment
- ____/____/____ Passed High School Equivalency Readiness Assessment
- ____/____/____ Completed High School Equivalency Orientation
- ____/____/____ Completed a Career Exploration Activity
- CFWV Strategic Compass Other
- ____/____/____ Earned a Digital Literacy Certificate
- ____/____/____ Met requirements for entrance into technical training
- ____/____/____ Met score requirements on entrance exam for college (i.e. ACT, SAT, Compass, Accuplacer)
- ____/____/____ Earned a Computer Essentials Achievement Certificate
- ____/____/____ Earned an Achievement Certificate

EMPLOYMENT RELATED / CERTIFICATES

- ____/____/____ Certificate of Work Ethic Proficiency (A-Game)
- ____/____/____ CPR, First Aid, or AED Certificate
- ____/____/____ Obtained a better job or job promotion
- ____/____/____ Obtained / retained subsidized job
- ____/____/____ Completed a worksite learning experience
- ____/____/____ Passed an employment or state licensing exam
- ____/____/____ Earned a Ready to Work Certificate
- ____/____/____ Completed an approved job readiness program
- ____/____/____ Entered military while enrolled,
specify date ____/____/____ (requires doc in student folder)
- ____/____/____ Earned IC3 Achievement Credentials: Select all that apply
- Computing Fundamentals Living On-line
 - Key Applications
- ____/____/____ IC3 Certification (must achieve all 3 IC3 Credentials)
- ____/____/____ Customer Service Certificate (Through The Customer's Eyes)
- ____/____/____ Customer Service Certificate II (Through The Customer's Eyes)
- ____/____/____ Food Service Handler Certification / ServSafe
- ____/____/____ OSHA Certification
- ____/____/____ Bloodborne Pathogen Certificate
- ____/____/____ Kitchen Safety Certificate
- ____/____/____ WV Welcome Certificate
- ____/____/____ Driver's License
- ____/____/____ FDIC Money Smart Certificate

FURTHER ED/TRAINING*

- ____/____/____ Enrolled in private WV college / university,
specify _____
- ____/____/____ Enrolled in public WV college / university
- ____/____/____ Enrolled in out-of-state post-secondary / job training
- ____/____/____ Enrolled in private / local training outside of WV's K-12 system
(i.e. Truck Driving, Cosmetology, Real Estate, Mining, CNA)
- ____/____/____ Enrolled in on-line post-secondary / Career Tech Ed (CTE)
(i.e. University of Phoenix Online, DeVry University Online)
- ____/____/____ Enrolled in local CTE program (i.e. WVEIS)
- *If selected, documentation MUST be in the student's permanent file
Achievement date MUST be date credential was earned.*

CONTEXTUALIZED LEARNING – Completed activity using:

- ____/____/____ Makey Makey (i.e. Electricity, Math, Career Awareness)
- ____/____/____ 3D Printer (i.e. History, Science, Lg Arts, Math, Career Awareness)
- ____/____/____ iPad/Tablet (i.e. History, Science Lg Arts, ELA, Math, Rding)
- ____/____/____ EV3 (i.e. Math, Teamwork, Science, Career Awareness)
- ____/____/____ Virtual Reality (i.e. Career Awareness, History, Rding, Lg Arts)
- ____/____/____ Raspberry Pi (i.e. Career Awareness, Teamwork, Science, Math)
- ____/____/____ Ozobot (i.e. Career Awareness, Teamwork, Science, Math)
- ____/____/____ Sphero (i.e. Career Awareness, Teamwork, Science, Math)

COMMUNITY

- ____/____/____ Increased involvement in community activities
- ____/____/____ Voted or registered to vote for the first time
- ____/____/____ Became a U.S. Citizen/Achieved Citizenship Skills
- ____/____/____ Volunteered for Community Service
- ____/____/____ Increased Involvement in Children's Ed
- ____/____/____ Increased Involvement in Children's Lit Activities