

For Office Use ONLY: Class Intake Date: _____

CLASS PLACEMENT:

ABE/GED: Day Night (level) I II III

ESOL: Day Night (level) I II III

- ☐ Counseling Notes ☐ Goals ☐ CCR
☐ Attendance Policy ☐ Release Information Form Y or N

(MAPT)	Level	Reading	Date	Level	Math	Date
Initial						
Second						
Third						

CLAS-E	Version	Score	Date
Initial			
Second			
Third			

BEST Plus	Score	Date
Initial		
Second		
Third		

TABE SCORES: R:

M:

Student ID #

Today's Date: _____/_____/_____

First Name: _____ **Middle Name:** _____ **Last Name:** _____

Previous Name: _____ **Gender:** Male ☐ Female ☐

Not Provided

Date of Birth: _____/_____/_____ **Social Security Number:** _____-_____-_____

☐ Not Provided

Previously Enrolled (Y/N): _____ **Site Name:** _____

Country of Birth: _____

City of Birth: _____

Immigrant: Yes / NO

Ethnicity: Hispanic/Latino Yes No

Race: (Can select more than one)

____ American Indian or Alaskan Native ____ White

____ Black or African American ____ Asian

____ Native Hawaiian or Pacific Islander

First Language: _____ **Primary Language Spoken at Home:** _____

Mandated Enrollment: Yes ☐ NO ☐

Home Address

Address: _____

City/Zip: _____

Home Phone: _____

Cell Phone: _____

Email address: _____

☐ Not Provided

Previous Address ☐ Not Provided

Address: _____

City/Zip: _____

Emergency Contact:

Name: _____ **Phone:** _____

Available for Classes in Summer: ☐ Yes ☐ No

Total Available Hours Per Week: (including class hours): _____

Referred By/Heard About Program From:

Another ABE Program
Career Center
MA Rehabilitation

Program Website/Facebook
Job
Waitlist

Friend/Relative
DTA/Welfare
Other

Newspaper
Court/Probation

EDUCATION: Last Grade Completed: _____ U.S. _____ Foreign*Please circle educational level obtained*

No High School diploma
Associate Degree
Some College (no Degree)

US High School diploma
Bachelors Degree

GED or ADP/EDP
Masters Degree

Foreign High School diploma
Doctorate Degree

EMPLOYMENT & HOUSEHOLD:**Employment Status:**

- ☐ Unemployed and looking for work
☐ Unemployed and not looking for work
☐ Retired or otherwise not looking for work
☐ Homemaker
☐ Employed

Occupation: _____
(required if employed)**Town of Employment:** _____**Start Date of Current Job:** _____ Month _____ Year**Job Type:**

- ☐ Full Time (30 or more hrs/wk)
☐ Part Time (less than 30 hrs/wk)
☐ Multiple Jobs
☐ Temporary Jobs

Have you recently been laid off? Yes _____ No _____
(If unemployed)**Public Assistance: (Check all that apply)**

- ☐ TAFDC ☐ SNAP/Food Stamps
☐ EAEDC ☐ WIC
☐ EA ☐ SSI
☐ None ☐ Other _____

Homeless: Yes _____ No _____**Shelter Name:** _____**Are you a Single Parent, Guardian or Caregiver?**☐ Yes ☐ No**Do you have children under 18 living at home?** ☐ Yes ☐ No**(Child Birth Year Required if Yes)****If you answered yes to children under 18 living at home, please write the birth year for each child/children.****Are they in School? (Y/N) Please mark (Y) for yes or (N) for no under each birth year. (Pre Kindergarten and up).****DISABILITIES AND ACCOMMODATIONS: OFFICE USE ONLY**

This Adult Basic Education Program does not discriminate on the basis of disabilities. Students/Applicants may, but do not have to disclose disabilities. Applicants who disclose disabilities may be entitled to reasonable accommodations.

1) Does the student/applicant understand that he/she is not required to disclose his/her disability?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2) Does the student/applicant wish to disclose a disability?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3) Does the student/applicant understand that self-disclosing a disability makes him/her eligible for reasonable accommodations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4) If Yes to #3, does the student/applicant wish to request any specific accommodations?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Student Name: _____

Instructor/Class: _____

Advisor: _____

Site: _____

Date Planning Began: _____

GED/HISET Testing History - Tested Yes _____ No _____ Start Date _____

Employed? Y N If yes, where? _____

What Is your job? _____

Schedule/hours: _____

Employment History: _____

Industry Certificate or License? _____

Other experiences (other than employment, such as volunteer work, event planning in children's school, babysitting, caring for elderly, homemaking, cooking, repairing household items, sewing, etc.)

Technology Survey

	In the house	Use at home	Use outside of home
Computer			
Internet access			
Social Media			
Smart Phone			
Texting			

Interests/skills/hobbies

Career/Education Goals

Goals

(Now-6months)_

Long Term Goals_

Follow up/updates

1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 2680, 26

SMART Goal Worksheet

Today's Date: _____ Target Date: _____ Start Date: _____

Date Achieved: _____

Goal: _____

Verify that your goal is SMART

Specific: *What exactly will you accomplish?*

Measurable: *How will you know when you have reached this goal?*

Achievable: *Is achieving this goal realistic with effort and commitment? Have you got the resources to achieve this goal? If not, how will you get them?*

Relevant: *Why is this goal significant to your life?*

Timely: *When will you achieve this goal?*

This goal is important because:

The benefits of achieving this goal will be:

Take Action!

Potential Obstacles	Potential Solutions

Who are the people you will ask to help you?

Specific Action Steps: *What steps need to be taken to get you to your goal?*

What?	Expected Completion Date	Completed

ABE New Student Checklist

Assessment (TAFE)	
<i>The following information must be collected at the time of initial assessment:</i>	Date
Last Name	
First Name	
DOB	
Address (if available)	
Phone and/or best contact number	
Personal Email (if applicable)	
 <i>Prior to student leaving be sure the following has been completed:</i>	
Scheduled time for individual advising appointment	
Distribution of next steps handout/guide etc.	
Distribution of General Program Information (sites, delivery options, etc)	
 <i>Prior to student returning for individual advising appointment the following must be completed:</i>	
Student Record Created in the Non-Credit Banner Database - MUST NOT ENROLL IN CLASS	
 Individual Advising	
<i>The following must be completed at the time of the individual advising appointment:</i>	Date
Completion of Program Intake Form	
Completion of Release of Information Form	
Review of Placement Scores and Initial Class Placement	
Discussion of expected progression and pathway to HSET completion	
MassCIS account set up	
iConnect Account Activation	
Brief iConnect Tutorial	
Discussion of Program and Community Resources	
 <i>Prior to student leaving be sure the following has been completed:</i>	
Distribution of Projected Academic Year Calendar	Date
Distribution of Program and Community Resource Handout	
Schedule of Group Orientation Session	
 <i>Prior to student returning for Group Orientation the following must be completed:</i>	
Creation of Electronic Student File	Date
Enrollment in the appropriate CRN within Banner	
 Group Orientation	
<i>The following must be completed at the time of the group orientation:</i>	Date
Review of the student handbook including the following policies:	
Attendance	
Student Conduct	
Alcohol and Substance Use	
Overview of HSET subject tests and format	Date
Introduction of Instructor(s) and overview of MWCC Curriculum	

ABE Continuing Student Checklist

Individual Advising	
<i>The following must be completed at the time of the individual advising appointment:</i>	Date
Updated of Electronic RegForm	
Completion of Release of Information Form (if not already on file)	
Review of Class Placement and Previous Year's Performance (Attendance, Academics, etc.)	
Discussion of expected progression and pathway to HSET completion	
MassCIS account log-in and brief review	
iConnect Account Activation (if necessary)	
Brief iConnect Tutorial (if necessary)	
Review of Previous Year Student Goals	
 <i>Prior to student leaving be sure the following has been completed:</i>	
Distribution of Projected Academic Year Calendar	Date
Distribution of Program and Community Resource Handout	
Schedule of Group Orientation Session	
 <i>Prior to student returning for Group Orientation the following must be completed:</i>	
Creation of Electronic Student File	Date
Enrollment in the appropriate CRN within Banner	
 Group Orientation	
<i>The following must be completed at the time of the group orientation:</i>	Date
Review of the student handbook including the following policies:	
Attendance	
Student Conduct	
Alcohol and Substance Use	
Overview of Program Curriculum and its ties to HSET and Employment	
Log-into Gmail Account and send Site Manager and Director an email	