



Career, Technical, Adult & Community Education

WORKFORCE EDUCATION REGISTRATION APPLICATION

REGISTRATION APPLICATION DIRECTIONS: Please print and use legal names. Please complete each item. Every item on this application is required by Florida Statute and/or Florida Administrative Code. If you feel you need assistance to complete this form please see a staff member at the time of registration.

STUDENTS WITH DISABILITIES: Accommodations and services are available to students with documented disabilities. If you have any special needs, please arrange an appointment for advisement/counseling with designated personnel at the school. Reasonable efforts will be made to accommodate your needs.

PROGRAM / COURSE REQUESTED			SECTION(S)	
FIRST NAME		LAST NAME		MI
BIRTH DATE (MM/DD/YYYY) ____/____/____	STUDENT ID #	Do you have a standard diploma/GED? <input type="checkbox"/> Yes (31) <input type="checkbox"/> No (30)	SOCIAL SECURITY # ____-____-____	
FORMER OR MAIDEN NAME (if applicable)		IN WHAT COUNTRY WERE YOU BORN?	GENDER <input type="checkbox"/> Female <input type="checkbox"/> Male	
RESIDENCY FOR TUITION PURPOSES: (Check one) Are you: <input type="checkbox"/> A Florida Resident? (4) (F) <input type="checkbox"/> An Out-of-State Resident? (5) (N)			ADULT HIGH SCHOOL DIPLOMA: (AHS students only) <input type="checkbox"/> 18 Credit Accel (A) <input type="checkbox"/> 24 Credits-HS Diploma (B)	

Please answer **BOTH** questions 1 and 2.

Ethnicity:

1. Are you Hispanic or Latino? (Please choose only one)

- Not Hispanic or Latino
- Yes, Hispanic or Latino – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race

Race:

2. What is your race? (Please mark all that apply)

- American Indian or Alaska Native - A person having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment
- Asian – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, e.g., Cambodia, China, India, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam
- Black or African American – A person having origins in any of the black racial groups of Africa
- Native Hawaiian or Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands
- White – A person having origins in any of the original peoples of Europe, the Middle East or North Africa

IN WHAT COUNTY DO YOU LIVE?

- Broward Miami - Dade Palm Beach Other _____

PERCEIVED EMPLOYMENT BARRIERS

Do you feel that you possess attitudes, beliefs, customs or practices that influence the way you think, act or work which may be a barrier to employment?

- Yes (C) No (N)

EX- OFFENDER

Previously or currently subject to any stage of the criminal justice process?

- Yes (E) No (N)

ARE YOU CURRENTLY EMPLOYED? (Check one)

- Yes (E)
- Employed but with a Notice of Termination or in transition of military service (S)
- Not employed (looking and eligible for employment) (U)
- Not in Labor Force (incarcerated, not eligible for employment or seeking employment) (N)

HOMELESS/RUNAWAY YOUTH (Check one)

- Homeless but staying without a fixed, regular nighttime residence (A)
- Homeless but staying in non-traditional housing (ex. park, abandoned building, or bus station) (B)
- Child of migrants who have changed school districts in the last 3 years due to parents' seasonal employment (C)
- Under 18 years of age and who has run away from home or legal residence without permission of his or her family (D)
- Does not apply (N)

MIGRANT/SEASONAL FARM WORKERS (Check one)

- Low-income individual (or their dependent) employed primarily in farming and currently unemployed or finding difficulty obtaining work for 12 months out of the last two years. (A)
- Migrant or seasonal farm worker (or their dependent) (B) Does not meet the conditions described above. (N)

HIGHEST SCHOOL GRADE COMPLETED (Check one)

- Completed at least part of 1st through 11th grade
Highest grade completed _____
- Completed 12th grade but did not attain a diploma or equivalency (12)
- Have a disability and attained a special diploma or high school certificate of attendance (15)
- Completed some college (16)
- Earned a Career Certificate (17)
- Earned AAS degree (18)
- Earned AS degree (19)
- Earned AA degree (20)
- Earned BA degree (21)
- Attained beyond a BA degree (22)
- Earned a High School Diploma (D1)
- Earned a high school equivalency (GED® Diploma) (G1)
- No school grades completed (ZZ)

Where was this level achieved? U.S.-based school (U) Not U.S.-based school (N) Unknown (X)

ARE YOU A U.S. MILITARY VETERAN? (Check one)

- Active Duty (A)
- Eligible Dependent (spouse or child) (D)
- Veteran (service dates unknown) (E)
- Active Member of the National Guard (N)
- Active Member of the Reserves (R)
- Veteran (service prior to 9/11/2001) (V)
- Veteran (service on or after 9/11/2001) (W)
- No Military History (Y)

IS ENGLISH YOUR NATIVE LANGUAGE? Yes No

If not, do you have difficulty reading and/or writing the English language? Yes (Y) No

CITIZENSHIP (Please indicate your citizenship)

- Non-Resident Alien (A) U.S. Citizen (C)
- Permanent Resident Alien (P) Unknown (X)

DISPLACED HOMEMAKER (Check one)

- Previously unemployed or underemployed while caring for home and family (unpaid) (A)
- Previously supported by public assistance or family, and now unemployed and underemployed (B)
- Parent of a child within two years of no longer receiving TANF (formerly AFDC) (C)
- Unemployed dependent spouse of a member of the Armed Forces who is on active duty/deceased or disabled as a result of military service (D)
- Does not apply (Z)

SINGLE PARENT/SINGLE PREGNANT WOMEN (Check one)

Are you a: Single Parent (S) Single Pregnant Woman (W) Both (B) Does not apply (Z)

STUDENT'S ADDRESS	APT.	CITY	STATE	ZIP CODE
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STUDENT'S E-MAIL	STUDENT'S TELEPHONE NUMBER
	CELL (___) ___ - ___ - _____ HOME: (___) ___ - ___ - _____

EMERGENCY CONTACT NAME	PHONE: (___) ___ - ___ - _____
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INTERNATIONAL STUDENTS (Technical Program Applicants)

Do you have an approved M-1 Visa? Yes No International Student Advisor verification: _____ (INITIALS)

I hereby certify that the information on this application is accurate to the best of my knowledge. I further certify that I am not currently expelled from the Broward County Public Schools.

Student Signature _____ Date _____

FINANCIAL ASSISTANCE (Check all that apply) Has student **received**:

- Pell Grant (A) SEOG (B) ITA (WIA) (D) Other need-based Financial Assistance such as scholarships or loans (E)
- District Financial Assistance (FAFTF) (F) Florida Public Postsecondary Career Education Student Assistance Grant (H)

STUDENT DISABILITY

Does the student request an appointment for Advisement/Counseling to discuss the need for testing/instructional accommodations?
 Yes No If yes, obtain an **Accommodation Advisement/Counseling Request Form** to begin the process.

FEE STATUS

Fee Required (R) Fee Waived (W) Fee Deferred (D) Fee Exempt Code: _____

Counselor or Designee _____ Date _____

Assistance was provided to the student in completing this form by: _____ Date _____

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