

ABE Student Intake Form

LAKES AREA ADULT EDUCATION 2024-25

☐ Intake/Enrollment

☐ Update

Signature (indicates student has read & understands Tennessee / Privacy Notice)			Intake date		Social Security Number**	
Last Name		First Name		Middle	Nickname*	Pronoun*
Street Address**			City, State**		Zip**	County* ISD*
Primary Phone* ____ Number accepts text messages		Secondary Phone* ____ Number accepts text messages		Email*		Contact Preference* ____ Email ____ Phone ____ Text ____ Mail ____ No Preference
Date of Birth ____/____/____ Month/Day/Year	Gender ____ Female ____ Nonbinary ____ Male ____ Decline to Answer ____ Other Gender Identity; specify (optional): _____			Country of Birth*		Primary Language*
Hispanic /Latino ____ No ____ Yes	Race ____ Amer Indian/ Alaskan Native ____ Native Hawaiian/ other Pacific Islander ____ Asian ____ Two or more races ____ Black or African American ____ White			Work Status ____ Employed ____ Employed, to be terminated/separated ____ Not in Labor Force ____ Unemployed; last work date: _____		
Public Assistance ____ None ____ Other ____ MFIP ____ SNAP Expiration date: _____ ____ SSI		Highest Formal Education Level ____ No School ____ Grades 9-12, no diploma ____ Some college, no diploma ____ Grades 1-5 ____ GED / HiSET ____ College / professional degree ____ Grades 6-8 ____ HS Diploma / alt. credential ____ Unknown				Educ Location ____ Non-U.S. ____ U.S.
Barriers to Employment - mark as many as apply ____ Cultural Barriers ____ Ex-offender ____ Low levels of literacy ____ Disabled ____ Foster care ____ Low income ____ Displaced homemaker ____ Homeless ____ Migrant worker ____ English language learner ____ Learning disabled * ____ Single parent				NRS Program - mark as many as apply ____ Community Corrections ____ Other Institutional ____ Corrections ____ Workplace Literacy ____ Family Literacy ____ Cond Work Referral ____ Non-NRS		
Emergency Contact Name*					Phone	
MFIP Job Counselor Name*		Agency		Phone Fax	Email	

Goals* – Check the SET column to indicate student goal. Check the MET column when the goal has been achieved.

Set	Met	Goal	Set	Met	Goal	Set	Met	Goal
		Enter Employment			Raise Accuplacer Score			Get More Involved in Children's Education
		Retain Employment			Enter Postsecondary Education			Read More to Children
		Get a Better Job			Enter Postsecondary Training			Get more involved in Community
		Get Promoted in my Job			Improve Basic Literacy Skills			Write Resume/Increase Job Search Skills
		Obtain a GED			Improve English Language Skills			Gain Computer Related Skills
		Local Credit-Based Diploma			Achieve Citizenship Skills			Gain Budgeting Skills
		State Competency-Based Diploma			Become a Citizen			Increase Life Skills

Test Name*: CASAS GOALS, GOALS 2, STEPS; TABE 11/12; Best Plus 2.0; GED; HiSET	Subject: reading, math, listening, etc.	Form	Test Date	Score

Tennessen Warning / Privacy Notice

This form tells you how we may use the information from your application and participation in this program. It also tells with whom we may share this information, and what will happen if you choose not to provide it.

Why do we ask you for program information?

We may ask you for information so we can:

- tell you from other persons with a similar name
- decide if you can receive our services
- decide which services you can receive
- receive state and federal funds to help you
- let program funders know if Adult Basic Education has helped you

You are not required by law to provide this information. If you choose not to provide this information, we may not know whether you are eligible for the program and may not be able to help you. Providing false information can lead to removal from the program.

How will we use the data?

We may use it to prepare required reports, conduct audits, review eligibility and to find out how the program is helping you.

Who will we share the information with?

We will share the information with staff, allowed by law, who need it to do their jobs in: The MN Dept. of Jobs & Training; U.S. Depts. of Health & Human Services, Labor, Housing & Urban Development, and Agriculture; and the software developer. We may share it with community-based agencies, local and state human service agencies, educational programs, and other agencies that help you. If you enroll in another MN Adult Basic Education program, your data will be shared with them.

Social Security Numbers

You do not have to provide your Social Security number. Federal Privacy Act and Freedom of Information Act dictate the use of this number. We may use it for computer matches, program reviews, improvements and audits.

How long will we keep the information?

After you leave the program, we will keep your file until state and federal laws let us destroy it.

If you do not understand this form, ask a staff person to explain it to you.

Instructor: Each student must sign the front of the entry form to indicate that s/he has read and understands this privacy notice.

ABE/ASE Level	CASAS		TABE		
	GOALS READING	GOALS 2 MATH	11/12 READING	11/12 MATHEMATICS	11/12 LANGUAGE
ABE Level 1	0-203	0-192	300-441	300-448	300-457
ABE Level 2	204-216	193-203	442-500	449-495	458-510
ABE Level 3	217-227	204-213	501-535	496-536	511-546
ABE Level 4	228-238	214-224	536-575	537-595	547-583
ABE Level 5	239-248	225-235	576-616	596-656	584-630
ABE Level 6	249 & up	236 & up	617-800	657-800	631-800

ESL Level	CASAS		BEST PLUS
	STEPS READING	STEPS LISTENING	VERSION 2.0
ESL Level 1	0-183	0-181	0-361
ESL Level 2	184-196	182-191	362-427
ESL Level 3	197-206	192-201	428-452
ESL Level 4	207-216	202-211	453-484
ESL Level 5	217-227	212-221	485-524
ESL Level 6	228-238	222-231	525-564
Completed ESL*	239 & up	232 & up	565-700

*Scores in Completed ESL cannot be used as a pre-test to sent an entry Educational Functioning Level (EFL)