

Last Name (Apellido)		First Name (Nombre)		Middle Name (Segundo Nombre)	Jr. / Sr. / III
Social Security Number (Numero de Seguro Social)	Date of Birth (Fecha de Nacimiento)	Gender (Check One) <input type="checkbox"/> Female (Mujer) <input type="checkbox"/> Male (Hombre)		Are you, your spouse, or your parent / legal guardian a law enforcement officer, firefighter or judge/justice? (Es ud., su esposa(a), o sus padres un oficial de la ley, bombero o juez de justicia?) <input type="checkbox"/> YES <input type="checkbox"/> NO	
Mailing Address (Number and Street) (Direccion)		Apt. / Bldg.	City (Ciudad)	State (Estado)	Zip Code (Codigo Postal)
Permanent Address (if different from above) (Direccion Permanente-si es diferente)		Apt. / Bldg.	City (Ciudad)	State (Estado)	Zip Code (Codigo Postal)
Home Phone (Telefono-Casa)	Cell Phone (Celular)	Email Address (Example: xxxxxxxx@xxxxx.xxx) (Correo Electronico)			

Emergency Contact Name / Phone Number (Nombre y numero de un persona en caso de emergencia)		How did you hear about the course? (Como escucho de este curso?) <input type="checkbox"/> (1) Advertisement <input type="checkbox"/> (2) Employer / Union <input type="checkbox"/> (3) Court Order <input type="checkbox"/> (4) Internet / Facebook <input type="checkbox"/> (5) Friend / Relative <input type="checkbox"/> (6) Teacher / Counselor <input type="checkbox"/> (7) Drive By <input type="checkbox"/> (8) Other: _____			
Are you of Hispanic or Latino ethnicity? (Es ud. de origen Hispano o Latino?) <input type="checkbox"/> YES <input type="checkbox"/> NO	Race (Check All That Apply) (Raza - Marque todas las que aplican) <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White				

What is your residency status? (Cual es su estado de residencia?)					
Coenrolled (High School):		<input type="checkbox"/> (3) In-County Resident	<input type="checkbox"/> (2) Out-of-State Resident	<input type="checkbox"/> (B) Out-of-County Resident	<input type="checkbox"/> (0) Foreign Exchange Student
Postsecondary (Adult):		<input type="checkbox"/> (4) Florida Resident	<input type="checkbox"/> (5) Out-of-State Resident	<input type="checkbox"/> (6) In-State Evacuee	<input type="checkbox"/> (7) Out-of-State Evacuee
In what Florida county do you reside? (Cual es su condado de residencia en la Florida?) <input type="checkbox"/> Hillsborough <input type="checkbox"/> Other: (Otro)					
What is your citizenship status? (Cual es su estatus migratorio?) <input type="checkbox"/> (C) U.S. Citizen <input type="checkbox"/> (P) Permanent Resident Alien <input type="checkbox"/> (A) Nonresident Alien <input type="checkbox"/> (X) Unknown or Not Reported					

What is your highest level of schooling? (Check One) (Cual es su nivel mas alto de estudio (escuela)? Seleccione Una)					
<input type="checkbox"/> (Z2) No school grades completed (Ningun grado terminado)		<input type="checkbox"/> (16) Completed some college, but did not earn a certificate or degree (Termine algunos anos de Universidad per no me gradue)			
<input type="checkbox"/> Completed at least part of 1st through 11th grade Highest Grade Completed (Enter 1 - 11) _____ (Grado mas alto terminado. Del 1 - 11 Grado)		<input type="checkbox"/> (17) Earned a career certificate (Certificado de Carrera)			
<input type="checkbox"/> (12) Completed 12th grade, but did not earn a diploma or equivalency (Termine el 12 grado pero no obtuve diploma)		<input type="checkbox"/> (18) Earned an associate of applied sciences degree (Asociado en Ciencias Aplicadas)			
<input type="checkbox"/> (D1) Earned a high school diploma (Diploma de 12 grado terminado)		<input type="checkbox"/> (19) Earned an associate of science degree (Asociado en Ciencias)			
<input type="checkbox"/> (G1) Earned a high school equivalency (Obtuvo lo equivalente a 12 grado)		<input type="checkbox"/> (20) Earned an associate of arts degree (Asociado en Artes)			
<input type="checkbox"/> (15) Earned a special diploma / special certificate of completion (Diploma de especializacion)		<input type="checkbox"/> (21) Earned a bachelor's degree (Titulo de Licenciatura)			
<input type="checkbox"/> (22) Attained beyond a bachelor's degree (Mas alla de la Licenciatura)					

Where did you receive your highest level of schooling? (Donde recibiste el mayor nivel de educacion?) <input type="checkbox"/> U.S. (including U.S. territories, U.S. military schools, or American schools overseas) (Estados Unidos (incluyendo sus territorios, escuelas militares o escuelas americanas en el extranjero)) <input type="checkbox"/> Non-U.S. school (Fuera de USA)	
Name and City/State of Last School Attended (Nombre de ciudad/estado de la ultima escuela que usted atendio)	Date of Last Attendance (Fecha de ultima asistencia)

Please check all that apply. (Seleccione todas las respuestas que le aplican)		<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been convicted of a felony? (Alguna vez has sido condenado por un delito grave?)
<input type="checkbox"/> Yes <input type="checkbox"/> No (Y) English not native or primary language - need assistance to read, understand, speak, or write English (Ingles no es mi primer idioma-necesito asistencia para leer, escribir y hablar Ingles)	<input type="checkbox"/> Yes <input type="checkbox"/> No (Y) Receiving assistance under the W.A.G.E.S. Act (Recibo asistencia de W.A.G.E.S Act)	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, have your rights been restored? (Si la respuesta es Si, sus derechos han sido restaurados?)
What is your current military status? (Cual es su estatus militar en los Estados Unidos)		Active: <input type="checkbox"/> (A) Active Duty Personnel <input type="checkbox"/> (N) National Guard <input type="checkbox"/> (R) Reserves	
<input type="checkbox"/> (Y) No Military History (No Historia Militar)		(Activo:) (Servicio Activo)	(Guardia Nacional) (Reservas)
<input type="checkbox"/> (D) Eligible Dependent (Dependientes Elegibles)	Veteran: <input type="checkbox"/> (V) Served prior to 9/11/2001 <input type="checkbox"/> (W) Served on or after 9/11/2001	<input type="checkbox"/> (E) Prior Service, Dates Unknown (Servicio Anterior, Fechas Desconocidas)	
	(Veterano:) (Seri antes del 9/11/2001)	(Seri durante o despues del 9/11/2001)	

THE SCHOOL SYSTEM PROVIDES SERVICES FOR PERSONS WITH DISABILITIES. IF YOU NEED ASSISTANCE IN THE COURSE OF YOUR STUDIES, PLEASE CONTACT A SCHOOL ADMINISTRATOR.

<b>TUITION REFUND POLICY, NON-DISCRIMINATION POLICY, AND STUDENT ACKNOWLEDGEMENT</b>	
ADULT EDUCATION BLOCK TUITION - Refunds will not be given if the student has attended class. CONTINUING EDUCATION COURSE TUITION - Refunds will be given only if class is cancelled. POSTSECONDARY ADULT VOCATIONAL (PSAV) AND APPLIED TECHNOLOGY DIPLOMA (ATD) PROGRAM TUITION - A student who withdraws from one of these programs will receive a refund of prorated tuition if the student withdraws on or before 10 percent of the scheduled course hours have commenced. After 10 percent of the scheduled course hours have commenced, no refund will be provided. (La informacion porporcionada es verdadera y correcta , y tambien entiendo la informacion relacionada con el reembolso)	
All information given is true and correct to the best of my knowledge, and I understand the refund information as stated above.	
Student Signature (Firma)	Date (Fecha)

The School District of Hillsborough County does not discriminate nor tolerate harassment on the basis of race, color, ethnicity, national origin, religion, gender, gender identity, sexual orientation, age, disability, marital status, genetic information or pregnancy in its educational programs, services or activities, or in its hiring or employment practices; and it will take immediate action to eliminate such harassment, prevent its recurrence, and address its effects. The following person has been designated to handle inquiries regarding non-discrimination policies: Dr. Pansy Houghton, Executive Officer, Compliance. 813-272-4000; pansy.houghton@sahc.k12.fl.us; Office of the Chief of Staff, 901 E. Kennedy Blvd., Tampa, Florida 33602.

<b>Office Use</b>	BLOCK 1 TUITION Date Paid _____ Tuition _____ Receipt No. _____	BLOCK 2 TUITION Date Paid _____ Tuition _____ Receipt No. _____	Primary Exceptionality _____ District Student Number _____	CTE ONLY First-Time Student? <input type="checkbox"/> (Y) 1st Time/Not Dual Enrolled <input type="checkbox"/> (D) 1st Time/Dual Enrolled <input type="checkbox"/> (N) Not first-time student	Site No. _____ Subsite No. _____
	CREDIT STUDENTS ONLY Program of Studies: _____ Student's Graduation Cohort (YY-YY): _____ - _____				

**STUDENT DATA SUMMARY**  
(Not for use by community education or coenrolled students)

Last Name (Apellido)	First Name (Nombre)	Middle Name (Segundo Nombre)	Jr. / Sr. / III	District Student No. (Numero del Distrito Escolar)
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*The following questions are requested by federal and state agencies supplying education funding. Please be assured that any information provided will not prevent your enrollment or participation in the course or program.* (Las siguientes preguntas son requeridas por las agencias federales que nos proporcionan fondos. Queremos asegurarles que la informacion que usted nos proporciona no va a prevenir su inscripcion o participacion en los cursos o programas.)

<b>Employment</b>	<b>EMPLOYMENT STATUS (Select One)</b> (Estado de Empleo - Seleccione una opcion)
	<input type="checkbox"/> (E) Employed (Empleado(a))
	<input type="checkbox"/> (S) Employed but with Notice of Termination or in transition out of military service (Empleado con aviso de terminacion o en proceso de asistir al servicio militar)
	<input type="checkbox"/> (U) Not Employed (looking and eligible for employment) (En busca de empleo y elegible para trabajar)
	<input type="checkbox"/> (N) Not in Labor Force (not seeking employment, not eligible for employment, or incarcerated) (No busco trabajo, no soy elegible, o estoy en la carcel)

**For the remaining questions, please select all that apply.** (Para las siguientes preguntas, seleccione todas las respuestas que le aplican)

<b>Student Background Information</b>	<b>SINGLE PARENT / SINGLE PREGNANT WOMAN</b> (Padre Soltero(a) / Madre Soltera Embarazada)
	<input type="checkbox"/> (S) Single Parent (Padre Soltero (a))
	<input type="checkbox"/> (W) Single Pregnant Woman (Madre Soltera Embarazada)
	<input type="checkbox"/> (B) Both a single parent and a single pregnant woman (Mujer Soltera y Embarazada)
	<b>DISPLACED HOMEMAKER</b> (Ama de Casa Desplazada)
	<input type="checkbox"/> (A) Previously unemployed or underemployed while caring for home and family (unpaid) (Previamente desempleada y a cargo del hogar y familia)
	<input type="checkbox"/> (B) Previously supported by public assistance or family and now unemployed or underemployed (Previamente recibí asistencia pública y hoy estoy desempleada(o))
	<input type="checkbox"/> (C) Parent whose youngest child will become ineligible to receive assistance from TANF (formerly AFDC) within the next two years and who is unemployed or underemployed (Padres desempleados a quien su hijo(a) va a ser ineligibile a recibir asistencia de TANF en los proximos dos años)
	<input type="checkbox"/> (D) Unemployed dependent spouse of a member of the Armed Forces who is on active duty or is deceased or disabled as a result of military service (Madre/padre desempleado que depende de su esposo(a) un miembro activo en las Fuerzas Armadas (el ejercito) o que murio/fue deshabilitado como resultado de un servicio militar)
	<b>MIGRANT / SEASONAL FARMWORKER</b> (Trabajador Migrante / Agricola Temporal)
	<input type="checkbox"/> (A) Low-income individual (or their dependent) employed primarily in agriculture or fish farming for 12 months out of the last two years, currently unemployed or underemployed (Individuo de bajos recursos (o sus dependes) trabajador agricola y que trabajo 12 meses en los ultimos 2 años o esta desempleado)
	<input type="checkbox"/> (B) Seasonal farmworker (or their dependent) whose agricultural labor requires travel such that the farmworker is unable to return to a permanent place of residence within the same day (Trabajador agricola temporal (o sus dependes) que requiere que su trabajo le impida regresar a su hogar el mismo dia)
	<b>HOMELESS</b> (Persona sin hogar)
	<input type="checkbox"/> (A) Homeless without a fixed, regular nighttime residence (Persona sin hogar / lugar fijo para dormir)
	<input type="checkbox"/> (B) Homeless but staying in nontraditional housing (Example: park, abandoned building, or bus station) (Se hospeda en un edificio vacio/un parque)
<input type="checkbox"/> (C) Migratory child who has changed school districts in the last 3 years due to parent's seasonal employment (Nino(a) de padres migrantes que ha cambiado de distrito escolar en los ultimos 3 años por causa de trabajo (agricola temporal) de los padres)	
<b>OTHER</b> (Otro)	
<input type="checkbox"/> (C) Perceived employment barrier(s) due to the student's attitudes, beliefs, customs, or practices. (Aparenta tener una barrera ante un empleo)	
<input type="checkbox"/> (E) Previously or currently subject to any stage of the criminal justice process for committing a crime or delinquent act (Sujeto a un acto criminal)	
<input type="checkbox"/> (A) Currently a patient or resident of a medical or special institution (but not incarcerated or homeless) (Actualmente paciente de un instituto medico)	

<b>Confirmation</b>	I have reviewed this form. Student Initials: _____ Date: _____ (He revisado este formulario.) (Iniciales:) (Fecha:)
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<b>Office Use</b>	<b>- Office Use Only -</b>			
	Presented to student for review; no changes since prior survey.	Survey	Staff Signature	Date
	Note: If the student has changes to report, please have them complete a new Student Data Summary form and attach to this document.	Survey	Staff Signature	Date
		Survey	Staff Signature	Date