

Intake Form EFFECTIVE JULY 1, 2020

Intake Date

Program Enrollment Type:

____/____/____

ABE ASE ELA/ESL Family Literacy IELCE Correctional Facility Other Institution

Social Security #: _____ - _____ - _____

Birth Date: ____/____/____
(month/day/year)

Name: _____
Last First MI

Home Address: _____
(Mailing Address / PO Box) City State Zip County

Home Phone

Email

Follow-Up Survey Information (select preferred method of contact)		Phone	Mail	Email	Personal Contact
GENDER	ETHNICITY AND RACE	WORK STATUS	LIFE EXPERIENCES	DISABILITY	EDUCATION
Male Female	1) Choose only one: Hispanic/Latino Not Hispanic/Latino	Employed (circle one) <i>Full-time job</i> <i>Part-time job</i> Unemployed Not in Labor Force	3) Check all that apply: Cultural Barriers Disabled Displaced Homemaker Economic Disadvantage English Language Learner Ex-Offender Exiting TANF w/in 2 years Foster Care Youth Homeless Long Term Unemployment Low Literacy Levels Migrant Farmworker Seasonal Farmworker	Do you have a record of a disability (e.g., learning disability, physical disability, or other type of disability)? Yes No Would you like to request a reasonable accommodation for any type of disability (e.g., learning disability, physical disability, or other type of disability)? Yes No If yes, what accommodation? _____	Highest Education Level Completed on Entry: _____ Was education completed in the U.S.? Yes No
Are you a single parent? Yes No	2) Check all that apply: American Indian or Alaska Native Asian Black or African American Native Hawaiian or other Pacific Islander White	Do these issues impact your ability to participate in the AE program? Transportation Child Care			
Household Income: <i>(Check box)</i>	<input type="checkbox"/> \$0 - 12,760 <input type="checkbox"/> \$30,681 - 35,160	<input type="checkbox"/> \$12,761 - 17,240 <input type="checkbox"/> \$35,161 - 39,640	<input type="checkbox"/> \$17,241 - 21,720 <input type="checkbox"/> \$39,641 - 44,120	<input type="checkbox"/> \$21,721 - 26,200 <input type="checkbox"/> \$44,121 - 48,601	<input type="checkbox"/> \$26,201 - 30,680 <input type="checkbox"/> > \$48,602

How many people are in your household? _____

How did you hear about this program? _____

Release of Information

All above information is self-reported and accurate. I understand the New Mexico Higher Education Department and the local Adult Education program may release my information for purposes of education or employment research/reporting.

Student Signature

Date

NNMC Adult Education Informed Consent Form

SOCIAL SECURITY NUMBER:

I agree to the use of my Social Security Number or my Taxpayer Identification Number by Northern New Mexico College and the Adult Education Program for reporting, research and record keeping. I understand that my number will be used to gather information about students and programs to meet state and federal funding requirements. It may be used to match with records from other agencies to gather information to help state and local agencies plan education and training services. Funding for college programs is based on this information. I understand that Northern New Mexico College and the Adult Education Program will protect my confidentiality under their guidelines and that at no time is my social security number given to any other party without my express consent.

PHOTOGRAPHS:

I hereby give Northern New Mexico College and the Adult Education Program permission to use photographs of me in any reports and publications, including informational brochures and the Northern New Mexico College website. I understand that Northern New Mexico College and the Adult Education Program will not publish the identity of any minor(s) pictured in photographs provided.

Date: _____

Student's Signature: _____

Print Name: _____

NNMC Adult Education Student Contract

Student Conduct:

Students in the Adult Education (AE) Program are required to follow the Northern New Mexico College policies and procedures, as well as AE policies. **Please refer to the AE Student Handbook and NNMC policies and procedures (<https://nnmc.edu>)**

Attendance Policy:

Students are required to attend classes as scheduled every week. If you are going to be absent, you **must let your instructor know in advance**. You will be allowed **TWO** absences during a 6-week session. If you are absent more than two times, you will be required to wait out a 6-week session before you can return to the program. If you need to stop attending classes altogether, you **must** notify the Director.

All students (new and returning) are required to complete Career Readiness classes, and they are mandatory before a student can graduate from the Adult Education Program. These classes will prepare you for college, career placement or acceptance into the military.

Testing Policy:

Students are required to complete pre-tests, progress tests, post-tests, and an Official High School Equivalency (HSE) Practice Test. Instructors will inform a student when he/she is ready to complete the post-test, HSE Practice Test, and Official HSE Test.

Student Progress:

The Northern New Mexico College AE Program provides services based on an adult learner's ability to demonstrate learning advancement and attain educational goal(s). If a student is attending his/her scheduled classes and doing the assigned work, he/she should show progress upon post-testing. **If a student does not show and maintain progress after 2 post-tests, the Director will determine whether or not the student will remain enrolled in the program.**

Students that reach the recommended HSE scores in a particular subject(s) will take the Official Practice HSE Test in the subject. If the student has reached the recommended scores on the Official Practice HSE Test, AE staff will assist the student in registering for the Official HSE test in the particular subject(s).

I understand the Student Contract as stated above. I understand that my failure to follow the contract may result in disenrollment from the program. The Northern New Mexico College AE Program reserves the right to make exceptions to the above stated policies on a case-by-case basis.

Date: _____

Student's Signature: _____

Print Name: _____

NNMC Adult Education Commitment Contract

In taking the Adult Education (AE) High School Equivalency classes, I recognize and understand the level of seriousness and commitment needed on my part.

Please check each box to show that you have read and understand each statement.

- I understand that I am responsible for my own success and that I have to work hard in and out of the classroom.
- I understand that homework may be assigned and that I will be expected to complete and return assignments by the due date.
- I understand it is my responsibility to attend all classes as scheduled and for the full duration of the session.
- I understand that I must notify each of my instructors by email if I am not going to attend class.
- I understand that I must come to class ON TIME and return from break ON TIME. If I am going to be late or if I need to leave early, I must notify my instructors.
- I understand that if I am 10 minutes late, I will be counted absent from class.
- I understand that I cannot have more than two absences in a 6-week period.
- I understand that if I have more than two absences, I will be disenrolled from the program.
- I understand that if I am disenrolled from the program for having more than two absences, I must wait out a regular 6-week session before I can return to the program.
- I understand that missing even one class will be a disadvantage to my learning and it will impact the progress I make towards obtaining my High School Equivalency credentials.
- I must notify the Program Director via withdrawal form if I am no longer able to attend classes.
- I understand that I am not allowed to use my cell phone in the classroom.
- I understand that I must be respectful to all staff and faculty, as well as other students.
- I understand that I must not use profanity in the classroom or make any threats.

By signing this contract I am committing to all of the above.

Date: _____

Student's Signature: _____

Print Name: _____



STATE OF NEW MEXICO High School Equivalency (HSE)—TESTING PROGRAM
 2044 Galisteo St. Suite #4, Santa Fe, NM 87505
 Dyanne.Salazar@state.nm.us

Underage Permission/Hardship/Withdrawal Form to Take the HSE Tests

On _____ (date) _____ (student's printed name) seeks permission to take the HSE Tests at: _____ (testing location).

All students under the age of 18 seeking to take the HSE Tests must first obtain parental/guardian consent and then gain permission for withdrawing from the district superintendent or designee of the school of last attendance. Finally, there must be a demonstrated hardship that explains why the student is withdrawing from school.

This form requires a New Mexico-issued student ID number. If the minor student does not have a state-issued student ID number or is home schooled, the student can still be tested. However in this case, this form shall be submitted directly to the NM HSE Testing Office by the testing center where a student ID number will be assigned to the student. If the student is home schooled, the home school operator is responsible for signing this form, which is to include the home school operator's confirmation number. A New Mexico high school equivalency credential and one transcript will be issued to all students who successfully pass the HSE Tests.

All information in this box is required and must be completed by the school district

Date of Birth (from school records): ____ / ____ / ____ Gender: M ____ F ____ Ethnicity: _____	Date of Withdrawal from School: <input type="checkbox"/>
Highest Grade Completed: (circle one) 6 7 8 9 10 11 12 other _____	<input type="checkbox"/> Check here if student is home schooled Home school confirmation number _____

The parent/guardian must provide a description of the hardship, explaining why the student cannot remain in high school and wishes instead to obtain a High School Equivalency Credential through HSE testing. School districts may require additional supporting documentation to demonstrate the hardship. (Continue your explanation on back, if necessary.)

Because of the above stated hardship, we agree that the student/minor shall be permitted to take the HSE Tests. Approval is granted once the form is completed, all signatures are obtained, and the form is submitted to the testing center.

Parent/Guardian (signature)

District Superintendent/ Designee/ Home School Operator (Signature)

Parent/Guardian (printed name)

District Superintendent/Designee/ Home School Operator (printed name)

HSE Test Site Manager/Chief Examiner (signature)

Public School District/ Home School

HSE Test Site Manager/Chief Examiner (printed name)