

**Mid-Coast School of Technology Adult Education**

**1 Main Street – Rockland, ME 04841**

**QuickBooks or Excel Course Application/Registration Form**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Town: \_\_\_\_\_ County & Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Soc Sec# \_\_\_\_\_ (required for Workforce)

Last Grade Completed in School: \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If yes, how long have you been with this employer? \_\_\_\_\_

What best describes your interest/reasons for taking course (mark all that apply)

\_\_\_\_ Employment with current employer in the field

\_\_\_\_ Employment in New Occupation

\_\_\_\_ Hobby/Personal

\_\_\_\_ Self-Employment

Course Name	Start Date
1. _____	_____
2. _____	_____

Please tell us what you hope to gain by the completion of the course(s):

## Release of Social Security Number and Exchange of Information

Adult Education in Maine is required by Title II of the Workforce Innovation and Opportunity Act to report how many adult learners:

- Are employed after attending adult education and/or
- Have entered college or a training program after attending adult education

Federal funds are used to pay for some of our classes including reading, writing, math, high school equivalency and high school diploma courses. Gathering employment and post-secondary education information is needed to receive the funding that pays for this part of adult education.

To get this information, this adult education program will use your Social Security Number to match adult education enrollment records with employment and post-secondary records with the agencies listed below.

- The Maine Department of Labor - To report how many adults from Maine Adult Education Programs are employed. The data match does not identify you by name or where you work.
- The National Student Clearinghouse - To report how many adults from Maine Adult Education Programs are enrolled in post-secondary institutions.

We are asking you to sign this form giving us permission to use your Social Security Number for a data match in order to obtain the information we need for federal reporting.

***The Information obtained by the Department of Education will be used for the sole purpose of data match reporting and will not be shared with other individuals of agencies without your written permission. All data used to conduct the data match will be purged from the Department of Labor system after the report is complete.***

I give permission to use my Social Security Number:

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

Thank you for registering in a **workforce training program** at Mid-Coast School of Technology.

Whether or not you are taking this course for professional advancement, we are asking you to complete the attached forms and to answer some basic demographic questions. The answers to these questions are used by the Department of Education to determine the need for these programs in our community. Because of this, we are unable to complete student registrations without the answers to these questions. If you don't provide them, we end up answering to the best of our ability, and these inaccurate responses throw off planning for rural communities such as ours.

Federal funding for Adult Education supports many of our programs and we appreciate your help in providing important programs to all members of our community. Please let us know if you need any assistance with the forms or have any questions in regard to your classes at MCST. You can reach us at 207-596-7752 x 3 or [adulthood@mcst.tec.me.us](mailto:adulthood@mcst.tec.me.us).

**Please indicate that you have read this statement.**

Yes

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ Preferred Name/Nickname: \_\_\_\_\_

Date of Birth: (MM/DD/YYYY) \_\_\_\_/\_\_\_\_/\_\_\_\_

Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Contact Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ ext. \_\_\_\_\_

Emergency Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Federal reporting requires us to ask which gender you most identify with. Please select one.**

Female  Non-binary gender non-conforming

Male  Prefer not to answer

**What are your preferred pronouns?**

she, her, hers  other

he, him, his  Prefer not to answer

they, them, theirs

**Federal reporting requires us to ask about race and ethnicity. If you select Non-Hispanic/Latino, you must also select at least one race. Check all that apply:**

Ethnicity - Hispanic/Latino  Race - Black or African American

Race - American Indian or Alaskan Native  Race - Native Hawaiian or Pacific Islander

Race - Asian  Race - White

**Do you have a Driver's License?** (circle one) Yes/No

**Do you have Reliable Transportation?** (circle one) Yes/No

**Are you Registered to Vote?** (circle one) Yes/No

**Do we have your permission to release academic records?** (circle one)

Yes/No

**Do we have your permission to release information (FERPA)?** (circle one)

Yes/No

*FERPA is a Federal law that protects the privacy of student education records. It applies to all schools that receive funds under applicable programs. For more information go to:*

<https://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html>

***The following questions are required by the Maine Department of Education for Workforce Training courses:***

**Do any of the following apply?**

Individual with a Disability.

Foster Care Youth Status at Program Entry

Long-term Unemployed at Program Entry

Homeless Individual, Homeless Children and

(More than 27 consecutive weeks).

Youths, or Runaway Youth at Program Entry

Exhausting TANF Within 2 Years (Part A Title

Ex-Offender Status at Program Entry

IV of the Social Security Act) at Program Entry

**Native Language :** \_\_\_\_\_

**Check all that apply:**

Does Not Apply (N/A)

In a Community Correctional Program

In correctional facility?

In other institutional setting?

Low Income Status at Program Entry

*Federal Poverty Guidelines for the 48 Contiguous US and District of Columbia are as follows:*

<i>Persons in Household</i>	<i>Income</i>	<i>Persons in Household</i>	<i>Income</i>
1	\$14,580	5	35,140
2	19,720	6	40,280
3	24,860	7	45,420
4	30,000	8	50,560

English Language Learner at Program Entry

Basic Skills Deficient/Low Levels of Literacy at Program Entry

Cultural Barriers at Program Entry

*Some examples of Cultural Barriers are: language, stereotypes and prejudices, signs and symbols, behaviors and belief, and a sense of isolation due to cultural differences.*

Single Parent at Program Entry

Displaced Homemaker at Program Entry

*A Displaced Homemaker is an adult who has not worked for wages full-time, year-round for a number of years, has cared for the home and family, is unemployed or underemployed, and is experiencing difficulty in obtaining or upgrading employment.*

Migrant and Seasonal Farm Worker Status at National Farmworker Jobs Program (WIOA sec. 167)

**Adult Education History (Check all that apply):**

Currently Enrolled

Earned Credits at 2 or more Adult Ed Programs

Earned High School Equivalency

None (N/A)

Earned Diploma

Previously Enrolled

Earned Credits at another Adult Ed Program

Earned a Certificate

**Living in Rural Area? (Circle One)**

Urban

Rural

**Do you receive Support Services, such as transportation, child care, or dependent care, necessary to enable an individual to participate in activities authorized under Title I of the Workforce Investment Act? (circle one)**

Yes/No

**Are you on Public Assistance?**

Check all that apply:

None (N/A)

WIC

Unemployment

MaineCare

Food Stamps (SNAP)

Migrant Worker

SSI or SSDI

TANF

**How did you learn about this program? (Check all that apply):**

Catalog

Educational or Other Institution

MCST Website

Career Center

Social Media

Employer

Previously Attended

Military Recruiter

Advertisement

Court

Friend/Relative

Other

**Please fill out the attached Release of Social Security Number and Exchange Information form and return it to MCST before your course begins.**

I have received the Release of Social Security Number and Exchange Information form (circle one):

Yes/No