



OFFICE USE ONLY
LACES ID: _____
Date of Entry Class: _____
<input type="checkbox"/> ABE <input type="checkbox"/> ELA
<input type="checkbox"/> Citizenship <input type="checkbox"/> Youth

NNLC ENROLLMENT APPLICATION

Date of Application: _____

Full Name _____ Birthdate _____ Age _____

Full Address _____ City _____ ST _____ ZIP _____

Email _____ Cell _____

SSN # _____ Gender: M F Race/Ethnicity _____

Native Language _____ Secondary Language: _____

Marital Status: Single Married Single Divorced Separated Do you have children? Yes No

If Yes, do you have access to childcare? Yes No Do you need access to childcare resources? Yes No

Are you a U.S. resident? Yes No Do you have authorization to work in the U.S.? Yes No

Are you an immigrant? Yes No Do you have a U.S. Passport: Yes No Expires: _____ Unsure

What year did you arrive in the U.S.? _____ Country of Birth: _____

Are you a migrant youth? Yes No

Are you a registered U.S. voter? Yes No

Are you a Veteran of the U.S. Military? Yes No

Most males aged 18-25, including Immigrant male youths, are required By federal law to register with The U.S. Selective Service.

Have you registered with the U.S. Selective Service?

Yes No Unsure

Do you require assistance with verifying your registration?

Yes No

Current Living Status: Parents Spouse/My Family Friends/Roommates Self Job Corps

Re-Entry Housing Youth or Family Shelter _____ Other _____

Number of Children Living with Participant: _____

Number of Other Dependents Living with Participant: _____

Referred By: _____

Select the best options

Program of Choice

- High School Equivalency (HiSET/GED)
- English Language Classes (ESL)
- Citizenship Preparation
- YouthBuild
- Learn and Earn

Preferred Location (English Language Program Only)

- Sierra View Library
- Sparks Family Resource Center
- North Valleys Family Resource Center
- Wedekind Road Main Office
- _____ 4th street

Preferred Class Delivery

- In Person Classes
- Online Self Study

Class Schedule Preference

- Morning
- Evening (Wedekind location only)

If you have chosen citizenship classes, select from the following options:

- Monday and Thursday 5:30 PM – 8:00 PM
- Tuesday and Wednesdays 5:30 PM – 8:00 PM
- Saturday 9:00 AM – 1:00 PM

EDUCATION HISTORY

Highest school grade completed (K-12)? _____ Did you graduate? [] Yes [] No Dates Attended _____

If Yes, do you have: [] High School Diploma [] High School Equivalency/HSE-GED

What high school or learning institute did you attend?

Are you currently enrolled at any school or learning institute? [] Yes [] No

If Yes, where?

Are you willing to attend Adult Basic Education (ABE) classes in order to complete your education? [] Yes [] No

Do you need resources to learn about free ABE classes at NNLC? [] Yes [] No

Do you need resources for: [] HiSET/GED [] Citizenship Prep classes
[] ESL/ELL Classes (English Language Learning)

Do you have low literacy skills: [] Yes [] No

I have access to: [] Internet/Wi-Fi [] Computer/Laptop/Tablet [] Webcam [] Printer [] Scanner

Have you attended any of the following schools?

- Truckee Meadows Community College
- Western Nevada College
- Great Basin College
- College of Southern Nevada
- None

PERSONAL & CULTURAL BARRIERS

Are you a single Parent/Guardian? [] Yes [] No Are you currently receiving public assistance? Yes [] [] No

If Yes, which type: [] SNAP [] SSI [] Unemployment [] TANF [] WIC [] Other _____

Do you have any personal barriers that may prevent you from completing a youth training program?

[] Yes [] No If Yes, explain:

I can read, write and understand English: [] Yes [] No [] Limited Ability (Capacidad limitada)

Do you have reliable transportation? [] Yes [] No

If between the ages 16-24 years:

Do you have cultural attitudes, beliefs, customs and/or practices that may prevent you from participating in a youth program?

[] Yes [] No If Yes, explain:

Have you been in Foster Care? [] Yes [] Yes, aged out [] No Are you a migrant seasonal worker? [] Yes [] No

Other Barriers:

SUBSTANCE/DRUG USE HISTORY

Drug use is not acceptable within all NNLC programs.

Do you currently use drugs? [] Yes [] No If Yes, which drug(s)?

Have you ever been treated for substance abuse? [] Yes [] No

Treatment Facility Name, City/State

Have you ever received a DUI/DWI? [] Yes [] No If yes, what year(s) _____

Would you like resources to help with substance abuse? [] Yes [] No

EMPLOYMENT HISTORY (Start with current or most-recent employment)

I am: Employed Not Employed Looking for Work Displaced Homemaker

If unemployed was it longer than 6 months Yes No

Company _____ Position _____ Hourly \$ _____

City/State _____ Start _____ Last _____ Still Employed

Work Schedule: M T W Th F Sa Su Shift: Morning Evening Overnight Work Hours: _____

Company _____ Position _____ Hourly \$ _____

City/State _____ Start _____ Last _____

Have you ever taken vocational or construction/trade education courses? Yes No

If Yes, where and what course(s): _____ Year(s) _____

Outcome: Certificate/License Obtained Associates/Degree Obtained Did not complete the course

Do you currently belong to a union? Yes No If yes, which union? _____

Do you have experience or skills in the following areas?

- Plumbing Electrical/Wiring Sheet Metal Roofing
- Dry Wall Power tools Lift Truck/Forklift Painting
- Carpentry Mechanical Construction Flooring
- Insulation HVAC/R Welding Automotive/Diesel
- Computers (Basic) Excel MS Word Power Point
- Web Design Help Desk CAD Equipment Solar Energy Technician
- Medical Asst. /CMA Nursing Asst. /CNA Dental Assistant Aesthetics/Esthetics
- Nail Technician Administrative Assist Bookkeeping/Acct Information Tech/Help Desk
- Veterinary Tech (Pets) EMT/Paramedic Phlebotomy Other _____

Do you have: Driver License (Class C, Standard) Learner Permit State-issued Photo ID
 CDL, Class A (Tractor-Trailer, Semi) CDL, Class B (Bus, Tow/Dump/Garbage/Delivery/Cement truck) Other _____

Do you hold certificates or degrees in any of the areas you marked above? Yes No
If yes, which areas? _____

CRIMINAL JUSTICE HISTORY

Have you ever been convicted of a crime? Yes No If Yes, what class? Misdemeanor Felony

Were you ever in a Juvenile Detention Facility? Yes No City/State _____

Were you ever in an Adult Correctional Facility? Yes No City/State _____

If Yes to above, length of time incarcerated: _____ weeks, _____ months, _____ years

Currently on Probation? Yes No Currently on Parole? Yes No Release Date: _____

Probation/Parole Officer: _____ Phone: (_____) _____ - _____

Are you a Child of Incarcerated Parent or Legal Guardian? Yes No

PHYSICAL / MENTAL HEALTH HISTORY

Find Substance Abuse and Mental Health Services at SAMHSA.gov.

Do you have a health condition or disability?

Yes No If Yes, explain: _____

Do you have medical insurance? Yes No Do you need resources for medical insurance? Yes No

Have you ever been treated for mental health? Yes No Do you need access to mental health resources? Yes No

If yes, please describe: _____

NNLC Student/Participant Expectations

While enrolled in and attending educational and/or youth programs at NNLC, I, the student/participant, am expected to:

- Attend all scheduled classes for the full scheduled time.
- Take a post-assessment after every 50-hours of instruction time to track my academic progress.
- Communicate with my instructor and NNLC Front Desk regarding any absences.
- Communicate with Student Services to receive assistance for any reason affecting attending classes.
- Communicate with my Youth Programs case manager regarding changes to my personal information.
- Attend the NNLC Orientation that will be scheduled after my initial enrollment assessment.

NNLC Privacy Policy

- I give my permission to Northern Nevada Literacy Council (NNLC) to speak to anyone who answers the phone numbers given regarding my attendance at NNLC.
- I give my permission to NNLC to contact my emergency contact in case of emergency. NNLC has my permission to talk to anyone who answers the phone in case of emergency.

Contact Name _____ Phone _____ Relationship _____

- I give my permission to NNLC to take photos and/or videos of me during special events and other times as needed to use in publications or for promotional and educational purposes to promote NNLC's programs.
- I give my permission to NNLC to contact me via phone, text or email.
- I give my permission to NNLC Youth Programs to contact the following people and/or agencies regarding my attendance, progress, and status in the program: _____
- I give my permission to NNLC Youth Programs to obtain progress reports from training institutes, training programs and instructors for the purpose of monitoring my progress in a youth program.



STATE OF NEVADA Adult Basic Education and Youth Programs Informed Consent Authorization

I, _____, consent to the release of information from my student record for the purposes of statistical reports.

I understand that this information is to assist the Nevada Department of Education in obtaining and reporting information concerning employment, training and education gains as required by federal legislation and regulations.

I understand that my student/participant record includes my social security number, which may be shared by the Nevada Department of Education with the following entities:

- Nevada Department of Employment Training and Rehabilitation (DETR)
- Nevada System of Higher Education

I understand that reports based on this information will contain statistics about follow-up measures for adult education students in Nevada, and that no specific or personal information about me will appear in these reports.

XXX-XX-_____
(Last 4 of SSN) Student/Participant Signature Date

PRINT Parent/Guardian Name Signature of Parent/Guardian of minor

NOTE: Consent to release information will remain on file with NNLC and will remain in effect for a period of two (2) years after completion of NNLC programs. Copies of these files can be requested from any student/participant at any time. Parents and Legal Guardians of minor students/participants may request copies of these files, as authorized, until minor turns 18 years of age.

NNLC Student Success Agreement

I, _____, understand that to enroll at NNLC, achieve success in my program, and graduate, I must agree to the following:

Attendance:

Student Initial

I understand I am required to attend class every day, Monday through Thursday, a total of 10 hours per week.

(YB students only) I understand I am required to attend class every day, Monday through Friday, a total of 20 hours per week.

I understand if I am unable to attend class, I must notify the front desk (via Remind, email, text, or phone call) and let them know I will be missing class and the reason.

(YB students only) I understand if I am unable to attend class, I must notify the YouthBuild Program Director, or the Youth Program Coordinator and let them know I will be missing class and the reason.

I understand if for any reason I am considering dropping my program, I will contact Student Services and discuss my reason for dropping the program.

Student Assessments:

Student Initial

I understand NNLC is a nonprofit organization serving the community at no cost to students.

I understand, as a requirement of my enrollment, I must complete the Comprehensive Adult Student Assessment System (CASAS) after every 50 hours of attendance.

Classroom Requirements:

Student Initial

I will respect others by not using my cell phone during class, including taking and answering calls, and texting unless directed by my instructor to the use of cell phone for academic purposes including research and instructional activities.

I will respect others including my instructor by refraining from classroom outbursts, speaking out of term, and following the student conduct policy as outlined in the Student Handbook.

I understand at times I will be challenged by the learning materials. At that time, I will seek additional support to master the learning by first speaking with my instructor as additional resources are available such as tutoring.

NNLC Student Consent to Release Information

I consent to allowing Northern Nevada Literacy Council to speak to the following people/organizations regarding my attendance and progress in the program.

Initial _____

Name and Relationship	Phone Number

I give my permission to NNLC to contact my emergency contact in case of emergency.

Initial _____

Emergency Contact and Relationship:	Phone Number

I give my permission to Northern Nevada Literacy Council to take photos of me during class and at special events as needed, and to use these photos in publications and/or promotional purposes to support the success of NNLC's program of instruction or Adult Basic Education in Nevada.

Initial _____

I give my permission to Northern Nevada Literacy Council to contact me via text or email on an automated system.

Initial _____

Signature _____ Date _____



This section to be completed by YouthBuild participants only

AUTHORIZATION TO VERIFY INFORMATION

The YouthBuild program may require you to work in extreme weather conditions including hot or cold temperatures. Participation in the YouthBuild program may also require you to perform physical labor at construction sites, and may require you to perform learning activities inside and outside of the classroom.

I am able to perform all of the above mentioned activities.

EMERGENCY CONTACTS

(This information will be used for emergency communications only. It will not be sold or presented to third parties.)

_____ Phone _____
(Name of Contact)

(Relationship)

I certify that the information in this application is true and correct to the best of my knowledge. I authorize NNLC staff to verify the information when reviewing my eligibility for the youth programs. I understand that I may be asked to provide documentation and agree to sign, if asked, one or more release forms to allow NNLC staff to verify the information I have provided.

X _____ **Date** _____

X _____ **Date** _____

(If needed, signature of Parent or Legal Guardian of minor student/participant)

YouthBuild Northern Nevada is supported by the US Department of Labor. A total of \$[1,357,079.00], or [75] percent of YouthBuild Northern Nevada is financed with federal funds, and \$[374,992.00], or [25] percent is funded by other sources. YouthBuild Northern Nevada is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.



EQUAL OPPORTUNITY

Northern Nevada Literacy Council (NNLC) is an equal-opportunity employer. NNLC employs qualified individuals without regard to their race, color, religion, creed, sex, national origin, citizenship, age, disability, genetic predisposition or carrier status, marital status, sexual orientation, uniformed service, protected activity (e.g., opposition to prohibited discrimination or participation in proceedings, covered by the anti-discrimination statutes) or any other characteristic protected by law. Toward this end, all employment-related activities are conducted on a non-discrimination basis in full compliance with federal, state, and local laws prohibiting discrimination in employment. Violations of this policy are strictly prohibited.

PRINT Participant's Full Name

Date

Participant's Signature

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