



Registration Form – Adult Education at DC 1707

Directions: (Please read carefully.)

Step 1 – Check the workshop and/or class (es) you want. This form is for one workshop/class only. Use additional forms for additional workshops/classes. Pre-registration is required. Admission is based on a first-come, first-served basis.

Step 2 – Submit a money order (**no checks or cash accepted**) for the workshop and/or class deposit(s).
(Money orders are available at your bank or credit union, US Post Office or at a local check cashing company.)

Step 3 – Make the Money Order payable to: *DC 1707 Educational Corporation*

Step 4 – Mail this form, the Money Order, a copy of your membership card (if member) and the Individual Student Record Form to: DC 1707 Educational Corp., 420 West 45th Street, NY, NY 10036.

Step 5 – If accepted, you will receive a confirmation letter with dates and the location of the workshops/classes.

Questions? Call the Education Department at 212-219-0022.

Workshops

Violence Prevention – Latecomers will not be admitted.

_____ Saturday, 9:30 – 12:00, May 5, 2012
 Free for DC 1707 members; \$40 for nonmembers.

Child Abuse – Latecomers will not be admitted.

_____ Saturday, 12:30 -3:00, May 5, 2012
 Free for DC 1707 members; \$40 for nonmembers.

CPR/First Aid – Latecomers will not be admitted.

_____ Saturday, 9:00 – 4:00, May 5, 2012
 \$45 for DC 1707 members; \$90 for nonmembers;
 CPR only: \$35 for DC 1707 members; \$70 for nonmembers

Infectious Diseases – Latecomers will not be admitted.

_____ Friday, 6:00 – 8:00pm, April 13, 2012
 Free for DC 1707 members; \$25 for nonmembers.

Driving Defensively – Latecomers will not be admitted.

_____ Saturday, 8:30 – 3:00, May 5, 2012
 Must have a valid NY Driver's License
 \$15 for DC 1707 members; \$25 for nonmembers

Interested in the CDA Program? Call the Education Department for more information: 212-219-0022.

Classes

\$25 for DC 1707 members and \$50 for nonmembers; fee is refundable with perfect attendance. Upon pre-registration, class dates will be confirmed. Call 212-219-0022 for enrollment and date confirmation.

General Classes:	Days	Time	Dates
___ Conversational Spanish	M&W	5:45pm–8:45pm	TBA
___ American Sign Language	M&W	6:00pm–8:00pm	TBA
___ GED Prep	SAT	10:00am–2:00pm	TBA
___ English as a Second Language	SAT	10:00am–2:00pm	TBA
Computer Classes:			
___ Introduction to Computers	SAT	10:00am–2:00pm	TBA
___ Basic Word	SAT	10:00am–2:00pm	TBA
___ Intermediate Word	SAT	10:00am– 2:00pm	TBA
___ Advanced Word	SAT	10:00am– 2:00pm	4/28
___ Basic Excel	SAT	10:00am–2:00pm	TBA
___ Intermediate Excel	SAT	10:00am–2:00pm	4/28
___ Advanced Excel	SAT	10:00am–2:00pm	TBA
___ Power Point (one day class)	SAT	10:00am-4:00pm	TBA
___ Publisher (one day class)	SAT	10:00am-4:00pm	TBA
___ Web Design	T&TH	5:45pm–8:45pm	4/10
___ Basic QuickBooks	T&Th	5:45pm–8:45pm	4/3
___ Advanced QuickBooks	T&Th	5:45pm–8:45pm	4/24
___ Photoshop	T&Th	5:45pm-8:45pm	5/1
___ QuickBooks (for Adv. Students [this is a one-day workshop])	SAT	10:00am-4:00pm	4/14
Education Preparatory Classes:			
___ LAST Prep	T&Th	5:45pm-8:45pm	TBA
___ ATAS Prep	SAT	10:00am–2:00pm	TBA
___ ATS-W Prep	T&Th	5:45pm–8:45pm	TBA
___ CST Prep	SAT	10:00am–2:00pm	TBA

First name _____ Middle/Maiden _____ Last name _____
 Address _____ Apt. _____
 City _____ State _____ ZIP _____ Social Security Number _____
 Email Address _____ Date of Birth _____
 Telephone (W) _____ (H) _____ (C) _____
 Please circle your local union: 95 107 205 215 253 389 or check here if a nonmember _____

Check only if returning student

1. Contact Information

INDIVIDUAL STUDENT RECORD FORM

AGENCY

First Name: _____ Last Name: _____ Union Affiliation: _____ Local: _____
 Date of Birth: _____ SS#: _____ Original Program Start Date: _____ Member _____ Family of member: _____
 Address: _____ Apt.#: _____ E-Mail: _____ Home Phone: _____
 City: _____ State: _____ Zip: _____ Cell Phone: _____ Work Phone: _____

2. Sex Male
 Female

3. Race/ Ethnic Identity

- A1 Native American
- A2 Alaskan American
- B1 Asian
- B2 Pacific Islander
- C1 African American
- C2 Afro-Caribbean
- C3 African
- D Latino/ a
- E1 White (not Latino/ a)
- E2 Other

4. Employment Status (check One)

- A Employed Full – Time
- B Employed Part – Time
- C Unemployed 1 year or more and available to work
- D Unemployed less than 1 year and available to work
- E Not available for employment

5. Funding Source:

6. Public Assistance

- Not receiving Public Assistance
- A TANF
- B Food Stamps
- C Refugee Cash Assistance
- D Old – aged Assistance
- Safety Net
- Aid to the Blind or Totally Disabled
- O Other, Specify _____

Case Number _____

7. Nationality

Country of Birth: _____

Date of US Settlement: ____ / ____ / ____

Native Language _____

Immigrant? Yes ____ No ____

Refugee? Yes ____ No ____

8. School Aged Children

Is the student the parent or guardian of the children under the age of 21?

Parent/ Guardian Yes ____ No ____

Single Parent Yes ____ No ____

If yes to above, enter number of children at each level

PreS ____ Elem ____ JHS ____ HS ____

9. Educational Background

Highest Grade completed in U.S. _____

Highest Credential from Other Countries:

- Non High School
- High School or Sec School Diploma/GED
- Undergrad/Bachelor's /Baccalaureate
- Master's/Graduate Degree
- PhD/Doctorate

Years of Schooling in Other Countries _____

1

10. Population Categories

- A Homeless
- B In Correctional Facility
- C Other Institutionalized
- D High School Graduates or Equivalent
- E Displaced Homemakers
- F Head of Household
- G Disabled
- H Enrolled in Other Education/Training
- I Veterans
- J Dislocated Workers
- K Employed at 200% of Poverty Level
- M Low Income
- R Resident of Public Housing
- Q Learning Disabled
- V Other: _____
- W Non Native English Speaker

11. Referral Source

- A Another Student
- B TV
- C Newspaper
- D Friend or Relative
- E Social Service Agency
- F Education Program
- G Training Program
- H Recruitment Poster/Flyer
- I GED Program
- J One-Stop
- K Radio
- L Library
- M Phonebook
- N Web Site
- O Other Literacy Organization
- P Returning Student
- R Workers Union
- S Employer
- X Other, specify _____.
- Y Church

12. Short-term Student Goals

- 1 Improve Basic Literacy Skills
 - 2 Improve English Literacy Skills
 - 3 Obtain a Job
 - 4 Retain Current Job
 - 5 Improve Current Job
 - 6 Earn GED Certificate
 - 7 Earn a Secondary School Diploma
 - 8 Enter Post-Secondary Education
 - 9 Enter Training
- Other Student Goals**
- 10 Obtain Citizenship Skills
 - 11 Reduce Public Assistance
 - 12 Get Involved in Community Activities
 - 13 Get Involved in Children's Education
 - 14 Get Involved in Children's Literacy Activities

Other: _____

13. Pretest Information

Test Name	Test Type		Test Date	Subscores				GE	Total
	Level	Form							

14. Initial Classes

Class Code	Date of Enrollment
	____ / ____ / ____
	____ / ____ / ____
	____ / ____ / ____

Form Completed By _____ Date: _____ Teacher Name _____
 Employer _____ Shift _____ Job Title _____ Work Location _____ Days of Class: _____ Time: _____