



**Adult Education Reporting Information System  
2015-2016 Intake Form**  
(\*Required fields for data entry)



**Arkansas Adult Education**  
*Move Ahead, So Life Won't Pass You By*

**Intake Person:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*Please search for an existing student and only if he or she cannot be found, [click here](#) to enter new student in the system.

**Student Bio Edit:**

<b>*First Name:</b> _____		Middle Name: _____	<b>*Last Name:</b> _____	
<b>*Date of Birth:</b> ____/____/____ (MM/DD/YYYY)		<b>*Gender:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male		
<b>*Address:</b> _____				
<b>*City:</b> _____		<b>*State/County:</b> _____		<b>*ZIP:</b> _____
<b>*Home Phone:</b> (____) _____		Emergency Phone: (____) _____		
Work Phone: (____) _____		Cell Phone: (____) _____		
State ID #: _____		Inmate #: _____		
E-mail Address: _____				
Data Matching (Permission to release SSN)?		<input type="checkbox"/> Has given permission		
Facebook / Twitter / Other Social Media: _____ (Not yet in AERIS)				

**Student Enrollment:**

<b>*LEA:</b> _____	
<b>*Enrollment Date:</b> _____ (mm/dd/yyyy):	<b>*Student Program Type:</b> <b>X NRS Registration (Must select)</b>
Select other Program Type if applicable:	
<input type="checkbox"/> Adult Transitions <input type="checkbox"/> Certificate Program <input type="checkbox"/> College Transitions <input type="checkbox"/> Credit Recovery <input type="checkbox"/> EL/Civics	<input type="checkbox"/> Enrichment <input type="checkbox"/> Family Literacy <input type="checkbox"/> GED/HS Diploma <input type="checkbox"/> Workforce Training <input type="checkbox"/> Work Ready
<b>*Contact Type:</b> <input type="checkbox"/> ABE/ASE <input type="checkbox"/> ESL	

## Student Demographics / Status Measures:

\*Social Security / EIN #: \_\_\_\_\_  
-OR-

AERIS-generated Student ID# \_\_\_\_\_

\*Ethnicity:  Hispanic/Latino  Non-Hispanic/Latino

**AND / OR**

- American Indian or Alaskan Native
- Asian
- Black or African-American
- Native Hawaiian or Other Pacific Islander
- White
- Two or more races

### \*Employment Status?

Full-time  Part-time  Unemployed  Not in the Labor Force

**Definition:** Whether the learner is employed, not employed, or not in the labor force at time of entry into the adult education program, according to the following criteria:

- **Employed**—Learners who work as paid employees, work at their own business or farm, or who work 15 hours or more per week as unpaid workers at a farm or business operated by a member of their family. Also included are learners who are not currently working but who have jobs or businesses from which they are temporarily absent.
- **Unemployed**—Learners who are not working but are seeking employment, make specific efforts to find a job, and are available for work.
- **Not in the Labor Force**—Learners who are not employed and are not seeking employment.

### \*Last Grade Completed in a US School:

- Unknown
- No Schooling
- Grades 1-5
- Grades 6-8
- Grades 9-12 (No Diploma)
- GED
- High School Diploma or alternate credential
- Some college, no degree
- College or professional degree
- Unknown

### \*Last Grade Completed in a Non-US School:

- No Schooling
- Grades 1-5
- Grades 6-8
- Grades 9-12 (No Diploma)
- GED
- High School Diploma or alternate credential
- Some college, no degree
- College or professional degree

\*\* Students earning a high school credential, or higher, in their native language will automatically be entered into the post-secondary/training cohort.

\*\* Cohorts **cannot** be changed after intake.

\*Last Year Attended: \_\_\_\_\_ Date High School Credential Achieved? \_\_\_\_\_

Last School Attended in US? \_\_\_\_\_

**\*Adult Education History?**

- |  |   |
|--|---|
| <input type="checkbox"/> Currently Enrolled                              | <input type="checkbox"/> Earned credits at 2 or more adult education programs |
| <input type="checkbox"/> Earned GED **                                   | <input type="checkbox"/> None   |
| <input type="checkbox"/> Earned Diploma                                  | <input type="checkbox"/> Previously Enrolled                                  |
| <input type="checkbox"/> Earned Credits at Current Program               | <input type="checkbox"/> Earned a Certificate                                 |
| <input type="checkbox"/> Earned credits at other adult education program |   |

**\*Citizenship?**

- US Citizen                       Lawfully admitted alien                       No Response
- \* Native Language? \_\_\_\_\_ Country of origin? \_\_\_\_\_
- Date of arrival in US? \_\_\_\_\_ Refugee?       Yes                       No

- Support Services?                       Yes                       No
- \*Living in Rural Area?**                       Urban                       Rural
- \*Single Parent?**                       Yes                       No
- \*Low Income?**                       Yes                       No
- \*Displaced Homemaker?\***                       Yes                       No
- \*Dislocated Worker?\***                       Yes                       No
- \*In program for homeless?**                       Yes                       No
- \*On Public Assistance?**                       On Public Assistance                       Not on Public Assistance
- Unemployment       Food Stamps                       Social Security                       WIC                       Other

\*A **displaced homemaker** is an individual who has been providing unpaid services to family members in the home and who: (A) has been dependent on the income of another family member but is no longer supported by that income; and (B) is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment.

\*A **dislocated worker** is an individual who has been terminated or laid off, or who has received a notice of termination or layoff, from employment.

- Physical Disability?                       Yes                       No
- Learning Disability?                       Yes                       No

\*\* If a disability status is checked above, please have the student sign the *Authorization for Release of Strictly Confidential Information to Local Staff or Volunteers* form, (Appendix A).

\*\* Place this form in a separate locked file.

<b>*In correctional facility?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>*In other institutional setting?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>*In a Community Correctional Program?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Driver's License?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Reliable Transportation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Registered to Vote	<input type="checkbox"/> Yes	<input type="checkbox"/> No

<b>*Learned about this program?</b>	
<input type="checkbox"/> Friend or family member <input type="checkbox"/> Newspaper or magazine <input type="checkbox"/> Pamphlet or brochure <input type="checkbox"/> Employer <input type="checkbox"/> Radio <input type="checkbox"/> Television	<input type="checkbox"/> Website <input type="checkbox"/> None <input type="checkbox"/> Other _____

Children in Local School System?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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**Student Registration:**

Is this a WAGE Student? Check for Yes <input type="checkbox"/>
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**Intake Hours:**

<b>*Intake Person:</b> _____ <b>*Intake Hours:</b> _____ (.25 - 2.00 hours)
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**\*Referring Agency:**

<input type="checkbox"/> Arkansas Rehabilitation Services (ARS) <input type="checkbox"/> Career Pathways <input type="checkbox"/> Community-based literacy organization <input type="checkbox"/> Court ordered <input type="checkbox"/> Department of Career Education (ACE) <input type="checkbox"/> Department of Corrections (DOC) <input type="checkbox"/> Department of Health (DOH) <input type="checkbox"/> One-Stop/Workforce Center <input type="checkbox"/> <b>Home School</b> , which district student resides in? _____ <input type="checkbox"/> <b>Local Public School</b> , which one? _____	<input type="checkbox"/> Transitional Employment Assistance (TEA) <input type="checkbox"/> Department of Human Services (DHS) <input type="checkbox"/> Department of Workforce Services (DWS) <input type="checkbox"/> Employment and Training Program (E & T) <input type="checkbox"/> Faith based organization <input type="checkbox"/> None <input type="checkbox"/> Other _____
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**Is this information correct?**

The information is correct

**Next Steps:**

**Complete the following tabs in AERIS:**

**\*Class Name:** \_\_\_\_\_

**\* Class Placement Date:** \_\_\_\_\_

Pre-Testing *(Enter Scores as soon as Pre-Test is given)*

Outcomes (Cohorts/Goals): Please Enter Secondary Reasons (if applicable)

- Achieved citizenship skills
- Increase visits to library
- Increase involvement in children's education
- Increase involvement in children's literacy-related activities
- Increase involvement in community activities
- Leave public assistance
- Obtain CRC (Career Readiness Certificate)
- Obtain WAGE Certificate
- Vote or register to vote for first time

**\*Selective Service:**

- This 18-25 year old male has been made aware of his obligation to register with the U.S. Selective Service System and has been made aware of how to register.

Refer to this website: <https://www.sss.gov/RegVer/wfRegistration.aspx>

Arkansas Adult Education provides equal educational opportunities to all students without regard to race, color, sex, age, religion, national origin, ancestry, or handicap.

No otherwise qualified disabled individual shall, solely by reason of such disability, be excluded from the participation in, be denied the benefits for, or be subjected to discrimination in programs or activities sponsored by a public entity.

I give permission for the information collected in the Arkansas Adult Education Reporting Information System (AERIS) to be used in data sharing within the Arkansas Department of Career Education/Adult Education Division, and with the Arkansas Department of Workforce Services and the Arkansas Department of Higher Education.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Appendix A**

**AUTHORIZATION FOR RELEASE OF STRICTLY CONFIDENTIAL INFORMATION  
TO LOCAL STAFF OR VOLUNTEERS**

**I give my permission to release information contained in the document(s) indicated below:**

Please date, initial and check [✓] the appropriate items below.

<u>Date</u>	<u>Initials</u>	<u>Check</u>	<u>Item</u>
_____	_____	[ ]	Learning Needs Screening
_____	_____	[ ]	Other: <u>Adult Education Reporting Information System 2014-15 Intake Form</u>
_____	_____	[ ]	School records from: _____
_____	_____	[ ]	Other records from: _____ _____

**I give permission to release the information contained in the documents indicated above to the following individuals for educational or assessment purposes:**

If the same information can be made available to several staff people, please list their names below. Then date, initial and check [✓] the appropriate individuals. If different information is going to various individuals, use separate forms.

DATE	INITIALS	[✓]	STAFF NAME

**This release is valid for one year from the date of my signature or until it is revoked in writing, whichever occurs first. This release has been read out loud to me and I understand its contents.**

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

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of staff person releasing the information: \_\_\_\_\_

*Adapted with permission from the West Virginia Regional Education Service Agency, 2006  
Updated July 2011*

# This Page is for Reference Only

*\*NOTE: If the BEST test scores are the result of an initial assessment (pre-test) AND the scores are 76 or greater on the Literacy BEST, and 541 or greater on BEST Plus, then do not enter the scores into AERIS. Since these students are above Advanced ESL and cannot show educational gain with the BEST, they should be given the TABE.*

## Educational Functioning Level Benchmarks (TABE 9-10)

	<b>TABE Reading</b>	<b>TABE Math</b>	<b>TABE Language</b>
101 <b>Beg ABE Lit (GL= 0-1.9)</b>	= <367	= <313	= <389
102 <b>Beg Basic Ed (GL= 2-3.9)</b>	368-460	314-441	390-490
103 <b>Low Inter. Basic Ed (GL= 4-5.9)</b>	461-517	442-505	491-523
104 <b>High Inter. Basic Ed (GL= 6-8.9)</b>	518-566	506-565	524-559
105 <b>Low ASE (GL=9-10.9)</b>	567-595	566-594	560-585
106 <b>High ASE (GL=11-12.9)</b>	= >596	= >595	= >586

## Educational Functioning Level Benchmarks (ESL)

	<b>BEST Literacy</b>	<b>BEST Plus</b>	<b>CASAS (Life Skills)</b>	<b>**TABE CLAS-E</b>
107 <b>Beg ESL Lit</b>	0-20	= <400	= <180	Total Reading & Writing: 225-394 Total Listening & Speaking: 230-407
108 <b>Low Beg ESL</b>	21-52	401-417	181-190	Total Reading & Writing: 395-441 Total Listening & Speaking: 408-449
109 <b>High Beg ESL</b>	53-63	418-438	191-200	Total Reading & Writing: 442-482 Total Listening & Speaking: 450-485
110 <b>Low Inter. ESL</b>	64-67	439-472	201-210	Total Reading & Writing: 483-514 Total Listening & Speaking: 486-525
111 <b>High Inter. ESL</b>	68-75	473-506	211-220	Total Reading & Writing: 515-556 Total Listening & Speaking: 526-558
112 <b>*Adv. ESL</b>	76-78	507-540	221-235	Total Reading & Writing: 557-600 Total Listening & Speaking: 559-600

\*\*Refer to the TABE CLAS-E Technical Manual for score ranges for individual reading, writing, listening, and speaking tests. Table shows total scores.

## Student Pre-test/Post-test Form

Student Name: \_\_\_\_\_  
First
Middle
Last

Class Enrolled: \_\_\_\_\_

### GED Tests

Date: _____	GED Practice	<input type="checkbox"/> Pass	<input type="checkbox"/> Fail
Date: _____	Practice Retest	<input type="checkbox"/> Pass	<input type="checkbox"/> Fail
Date: _____	Official GED	<input type="checkbox"/> Pass	<input type="checkbox"/> Fail
Date: _____	Official GED Retest	<input type="checkbox"/> Pass	<input type="checkbox"/> Fail

### Pre-Test

Date: \_\_\_\_\_

Test Form:  9  10

Assessment Hours: \_\_\_\_\_

	EFL	Scores	Grade
TABE Reading:			
TABE Math:			
TABE Language:			
*BEST Literacy:			
*BEST Plus:			
CASAS Reading:			
CASAS Listening:			

### Post-Test

Date: \_\_\_\_\_

Test Form:  9  10

Assessment Hours: \_\_\_\_\_

	EFL	Scores	Grade
TABE Reading:			
TABE Math:			
TABE Language:			
*BEST Literacy:			
*BEST Plus:			
CASAS Reading:			
CASAS Listening:			

### Post-Test

Date: \_\_\_\_\_

Test Form:  9  10

Assessment Hours: \_\_\_\_\_

	EFL	Scores	Grade
TABE Reading:			
TABE Math:			
TABE Language:			
*BEST Literacy:			
*BEST Plus:			
CASAS Reading:			
CASAS Listening:			

*\*NOTE: If the BEST test scores are the result of an initial assessment (pre-test) AND the scores are 76 or greater on the Literacy BEST, and 541 or greater on BEST Plus, then do not enter the scores into AERIS. Since these students are above Advanced ESL and cannot show educational gain with the BEST, they should be given the TABE.*

## Release of Confidential and/or Academic Information

I, \_\_\_\_\_, authorize \_\_\_\_\_  
*(Student Name)* *(Program Name)*  
to use my name and/or photo in the following manner:

*(Initial below if you agree)*

\_\_\_\_\_ Graduation Packet, mailings, program, news release, and/or booklet

\_\_\_\_\_ Newsletter

\_\_\_\_\_ Television

\_\_\_\_\_ Videotaping

\_\_\_\_\_ Photographing

\_\_\_\_\_ Radio

\_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_ All Listed Above

This release is valid from the date of signature until \_\_\_\_\_ (Ending Date) or until cancelled by the undersigned in writing. I understand that my participation in GED Testing will be kept confidential and will not be used in any media manner other than stated above without my consent.

This release form has been read and reviewed with me, and I understand its contents.

\_\_\_\_\_  
(Student Signature) (Guardian's Signature, if applicable) (Date)

\_\_\_\_\_  
(Street Address/P.O. Box) (City) (State) (Zip)

\* Expiration date or cancelled by student in writing