

Name: _____ Student ID: _____ Date: _____

Students: Read each statement and check all boxes that apply to you.
(This helps us connect you with the right support and resources.)

Special Programs

- I'm currently housed in a jail, detention center or prison (*Correctional Facility, Not in Labor Force*)
- I'm currently residing in a sober living facility, transitional living facility, rehabilitation facility, or I participate in an Adult Recovery Court Program (*Community Corrections*)
- I'm currently staying in a long-term care or residential facility (*Other - Institutional*)

Student Data

- I've been dependent on someone else's income (homemaker, etc.) & now need a job. (*LI*)
- I receive Social Security Insurance (SSI) benefits for myself or my children. (*LI*)
- It's hard to make ends meet with my income. (*LI*)
- I or my children have Medicaid Insurance. (*LI, PA- Other*)
- I currently receive or have received SNAP (food stamps) in the last 6 months. (*LI, PA- Other*)
- I currently receive or have received WIC benefits in the last 6 months. (*LI, PA- WIC*)
- I live in public housing or receive rental assistance. (*LI, PA- Other*)
- I currently receive or have received TANF in the last 6 months. (*LI, Exhausting TANF*)
- I don't feel part of American culture or society. (*Cultural Barrier*)
- My beliefs, religion, or personal lifestyle are keeping me from getting a job. (*Cultural Barrier*)
- I'm not fluent in English. (*English Language Learner, Low Literacy*)
- I need to improve my reading, writing, or math skills. (*Low Literacy*)
- I don't read very well. (*Low Literacy*)

Disabilities

- I have a physical disability. (*Other*)
- I have been diagnosed with or believe I have a learning disability. (*Learning*)
- I have an emotional or mental health condition. (*Intellectual*)

Employment History & Background

- I've been unemployed for more than 6 months. (*LI, LT Unemployment*)
- I lost my last job due to lay-off, downsizing, lack of work, or business closure more than 1 year ago. (*Dislocated Worker*)
- I have a felony on my record. (*Ex-offender*)
- I'm on probation, parole, or currently incarcerated. (*Ex-offender*)
- I live with a family member or friend and/or do not have a permanent place to live.
- I move often because I do not have a permanent address.

Family Responsibilities

- I am a single, separated, divorced, or widowed parent with primary custody of children under 18. (*Single Parent*)