**Introduction to Healthcare Professions**

**Prospective Student Intake Form**

**Date of meeting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Last Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_First Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SS#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Datatel ID #\_\_\_\_\_\_\_\_\_\_\_\_\_DOB:\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_**

**Is English a second language? \_\_\_yes \_\_\_no If yes, what is native language?\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Are you a U.S. citizen? \_\_\_\_yes \_\_\_\_no**

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Apt.#\_\_\_\_\_\_\_\_\_**

**City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Phone: (\_\_\_\_\_)\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: (\_\_\_\_\_\_)\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_**

**Employed? \_\_\_F/T \_\_\_PT \_\_\_Unemployed \_\_\_\_Not in labor force Hrs. per week:\_\_\_\_\_\_**

**Occupation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Place of employment\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Highest Degree Earned:**

\_\_\_Less than high school diploma/GED \_\_\_Associate Degree

\_\_\_High School Graduate \_\_\_Bachelor’s Degree

\_\_\_Successfully passed at least one college course \_\_\_Master’s Degree

\_\_\_Certificate \_\_\_Other

**How did you learn about this course?**

\_\_\_ class presentation \_\_\_orientation \_\_\_\_brochure or poster \_\_\_\_another student\_\_\_\_

\_\_\_\_my teacher \_\_\_\_other

**What previous ESL or ABE instructor at ECC may we contact for further information or recommendation**?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What course(s) are you enrolled in for Fall Semester 2009?**

**GED\_\_\_\_ ESL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(please list level and number) \_\_\_\_\_other**

**Checklist of Topics for Discussion for Screening Interview**

1. **Issues of eligibility**
	1. **Drug testing**
	2. **Criminal background check**
	3. **Concurrent enrollment in GED or ESL (current TABE and CELSA on file)**
	4. **Legal documentation**
	5. **Immunization**
2. **Availability for attendance**
	1. **Class meets M-W 12:15 -1:45 pm, 9/21-12/16/09, Fountain Square Campus**
	2. **Child care issues**
	3. **Work hours**
	4. **Previous course history and attendance record**
3. **Readiness for future academic commitment**
	1. **Personal health (mental and physical)**
	2. **Child care issues**
	3. **Family support for the full journey**
	4. **Financial support/planning**
	5. **Work life**
4. **current hours; overtime**
5. **fall/spring/summer schedule changes**
6. **employer support**
7. **unemployment**
	1. **Study habits**
	2. **Time management (work outside of the classroom will be required)**
8. **Computer access and literacy**
	1. **Computer at home**
	2. **Email account**
	3. **Present skills (online, WORD)**
9. **Students with degrees, certificates in native countries**
	1. **Formal transcript evaluation**
	2. **Interpretation/implication for US employment, education, certification**
10. **Fluency in conversational English**
	1. **Easily understood; clear pronunciation; adequate vocabulary; confident**
	2. **Easily understood despite some pronunciation difficulties and hesitation; adequate vocabulary; confident**
	3. **Able to communicate in the conversation; some pronunciation difficulties; some need for clarification or repetition; developing vocabulary ; somewhat confident**
	4. **Difficulty communicating; pronunciation difficulties prevent understanding; insufficient vocabulary; frequent need for clarification and repetition**

***All students may be further assessed by ESL instructor to determine correlating proficiencies in reading and writing.***

**Students assessed with:**

**A**  **rating—eligible candidate**

**B rating---eligible**

**C rating—should be assessed by ESL instructor for eligibility**

**D rating—lack sufficient fluency; ineligible**

Please see Mary Lloyd, FSQ rm. 365-B

**Permit to register for Introduction to Healthcare Professions**

***ESL 117, M-W, 12:15 pm, 9/21-12/16/09, Fountain Square Campus***

**Date of meeting with Judy Burman \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Judy Burman\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Last Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_First Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Home Phone: (\_\_\_\_\_)\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: (\_\_\_\_\_\_)\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_**

***To be completed by registrant Mary Lloyd:***

GED registration information for Fall 2009:

ESL registration information for Fall 2009:

Valid test scores on file:

Second version: less information; printed on colored paper; half sheet

Please see Mary Lloyd, FSQ rm. 365-B

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

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Valid test scores on file: