



SECONDARY/EMERGENCY CONTACT INFORMATION

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: \_\_\_\_\_ : \_\_\_\_\_, : \_\_\_\_\_  
: \_\_\_\_\_

HOW DID YOU HEAR ABOUT US?

ACADEMIC GOALS

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( \_\_\_\_\_ ):  
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HOW WOULD YOU DESCRIBE YOUR PROFICIENCY IN  
MATH?

NOT

AUTHORIZATION FOR RELEASE OF SCHOOL RECORDS

Pursuant to my signature below, I hereby (a) authorize the Program Parties to inspect and copy any academic, attendance, disciplinary and/or nan