

# 2013-14 NM GRADS Enrollment Form



Student Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
 Student ID #: \_\_\_\_\_ (used at school given from PED)

## Section 1 GRADS ENROLLMENT INFORMATION

(Revised 9/18/13)

1. Your Date of Birth: \_\_\_\_\_
2. Age: \_\_\_\_\_
3. Gender: ☐ Female; ☐ Male
4. Ethnicity: Are you Hispanic or Latino? ☐ Yes; ☐ No
5. Race: How would you best describe yourself? Check ALL that apply: ☐ American Indian or Alaska Native; ☐ Asian; ☐ Black or African American.; ☐ Native Hawaiian or Other Pacific Islander; ☐ White/Non-Hispanic; ☐ White/Hispanic; ☐ Unknown
6. How well do you speak English? ☐ Very Well, ☐ Well, ☐ Not Well, ☐ Not at all
7. Circle the grade you are in TODAY: 7, 8, 9, 10, 11, 12, enrolled in GED program, Post-Grad, Not enrolled in High school or GED
8. Were you enrolled in GRADS last year? ☐ Yes; ☐ No
9. Are you or your partner pregnant now? ☐ Yes; ☐ No
10. How many children do you now have? 0, 1, 2, 3, 4
11. Is your child's other parent in a GRADS program (in class or case managed)? ☐ Yes; ☐ No
12. Age of your child's other parent: \_\_\_\_\_
13. Are they attending School? ☐ Yes; ☐ No
14. Where? \_\_\_\_\_
15. Relationship Status ☐ single, ☐ with child's other parent, ☐ with another partner, ☐ married
16. Are you and your child's other parent co-parenting (you do not have to be living together)? ☐ Yes, ☐ No
17. Living arrangements—(Check the one that describes your situation most of the time): ☐ With my parent(s); ☐ With my parent(s) and my partner; ☐ With my partner; ☐ With my partner and his/her parent(s) or other related adult(s); ☐ Married live with spouse; ☐ Live alone or with my child/ren; ☐ With other unrelated adult(s); ☐ Foster or group home; ☐ Homeless/no permanent residence; ☐ Other(Specify) \_\_\_\_\_

## Section 2 Females Only (If you are a MALE go to section 3)

18. If you are pregnant, what is your DUE date? \_\_\_\_\_
19. During this pregnancy, in what month did you FIRST seek medical care? 1, 2, 3, 4, 5, 6, 7, 8, 9
20. If later than the 3rd month, why did you wait? ☐ Not Applicable; ☐ Denying pregnancy; ☐ I was afraid; ☐ I did not know where to go for help; ☐ Other \_\_\_\_\_

## Section 3 (Check ALL that relate)

21. Have you ever STOPPED attending school before the semester ended? ☐ Yes; ☐ No.
22. What month & year was that? \_\_\_\_\_
23. REASON: ☐ Pregnancy related; ☐ Poor grades-gave up; ☐ Social issues; ☐ Expelled; ☐ Arrested; ☐ Other \_\_\_\_\_

## Section 4

24. Do You or Your Child Receive any of the public assistance listed below? ☐ Yes; ☐ No.
25. If yes "Check" ALL that apply at time of enrollment: ☐ TANF (cash assistance); ☐ WIC; ☐ Housing; ☐ Food Stamps/SNAP; ☐ Medicaid; ☐ SSI; ☐ Child Care Bureau; ☐ Free/reduced meals; ☐ Help with utility bills thru Income Support; ☐ Indian Health Services; ☐ Transportation Services; ☐ Birth Control; ☐ Prenatal Care; ☐ Counseling; ☐ School-Based Health Clinic; ☐ New MexiKids; ☐ Well Baby Clinic Services/Immunizations; ☐ Child Protective Services; ☐ other \_\_\_\_\_.
26. Do you ☐ receive MANDATED child support, ☐ give MANDATED child support? ☐ Neither
27. Do you ☐ receive, ☐ give money on a regular basis for child support (non mandated)? ☐ Neither
28. Are you currently employed? ☐ Yes; ☐ No

## Section 5 YOUR CHILD(REN) (record information listing youngest child first)

29. Baby's Name (First & Last)	*Gender (M/F)	*Date of Birth	*Birth Weight lbs & oz's	Baby Lives with _____ most of the time

GRADS Site #: \_\_\_\_\_ Teacher \_\_\_\_\_ School Year \_\_\_\_\_; Semester \_\_\_\_\_