## 2013-14 NM GRADS Exit Form



| Student Name:GRADS Teacher:   |  | Student ID #:<br>Date:                         |  |                   |  |  |  |  |
|---|--|--|--|-------------------|--|--|--|--|
| Section 6 (To be completed by participant at year's end or at time of exit from GRADS class)  30. Are you pregnant now? □ Yes; □ No  31. If Yes, did you become pregnant AFTER you were enrolled into the GRADS class? □Yes; □ No  32. Did you have a baby born during this school year: □ Yes; □ No; □ other  33. If you had a baby during this current school year, fill out information below.   |  |  |  |                   |  |  |  |  |
|   | Baby's Name  | Gender<br>(M/F)                                | Date of Birth  | Birth Weight      | Baby Lives with                                      |  |  |  |
|   | (First & Last)   | (NI/F)   |  | lbs & oz's        | most of the time                                     |  |  |  |
|   |  |  |  |                   |  |  |  |  |
| 34.   | 4. Number of children you <i>NOW</i> have at the end of this school year (or exit from program): 0, 1, 2, 3, 4   |  |  |                   |  |  |  |  |
| 35.   | 5. During the course of this school year did your "childcare provider" receive NM Child Care   |  |  |                   |  |  |  |  |
| 36.   | Bureau (CYFD) reimbursements? □ Yes; □ No  36. Does your child receive ECI services from the CC center or another location? □ Yes; □ No  |  |  |                   |  |  |  |  |
| 1   | 7. Did any of your child(ren) attend the GRADS Child Development Center?   Yes;   No;   I don't have any   |  |  |                   |  |  |  |  |
| 38.   | children yet (still pregnant, no other children)  8. If yes, how many of your children use the GRADS Child Development center:   |  |  |                   |  |  |  |  |
|   | How often; □ All of the time; □ Sor  | ne of the tin                                  | ne   |                   |  |  |  |  |
| 39.   | <b>9. If no, who cares for your child?</b> Child cared for by family member: □ paid; □ unpaid; □ Other Child Care Arrangements;  |  |  |                   |  |  |  |  |
|   | Any issues with center: □ Yes; □ No  |  |  |                   |  |  |  |  |
| 41.   | If YES, check all that apply: □ no slo □ conflicts with child care provider(   |  |  |                   |  |  |  |  |
| Sec   | etion 7  |  |  |                   |  |  |  |  |
| 42. Do you or your child receive any of the following public assistance listed below? ☐ Yes; ☐ No.  43. If Yes, Check All Services that You and Your Child now receive: ☐ 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 ☐  44. Do you ☐ receive MANDATED child support, ☐ give MANDATED child support? ☐ Neither  45. Do you ☐ receive, ☐ give money on a regular basis for child support (non mandated)? ☐ Neither  46. 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 ☐ |  |  |  |                   |  |  |  |  |
| 49. Identify what type of social and emotional support (during the last 4 weeks) your youngest child's father   |  |  |  |                   |  |  |  |  |
|   | provides for you or your child, or y | nclude givir<br>ving for Dr's<br>ude assisting | ng money, child su<br>visits)<br>with child care, go | pport payments, b | ouying clothes, diapers or sits, helping with chores |  |  |  |

## 2013-14 NM GRADS Exit Form Continued



|     | Student Name:  | Student ID #:   | Over 20 Years             |  |  |  |
|-----|--|---|---------------------------|--|--|--|
|     | GRADS Teacher:   | Today's Date:   |                           |  |  |  |
|     |  |   | Revised 9/18/13           |  |  |  |
|     | ction 8 (Check ALL that apply)  Circle the grade into which you are going: 7, 8, 9, 10, 11, 12. □ I am enrolled in a GED program;  □ I earned my GED; □ I am Graduating from High School this school year; □ I am post graduate.   |   |                           |  |  |  |
| 51. | This year I participated in: (Check ALL that apply) □ A GRADS Peer Educator Training; □ Peer Education Presentations; □ Teen Parent Panels; □ Community Presentations; □ School Board Presentations; □ Legislative Advocacy activities; □ Legal Rights Workshop; □ Legal Clinic; □ Teen Dating Violence Workshop; □ Circle of Security; □ None |   |                           |  |  |  |
| 52. | Are you currently employed?   Yes;   | □ No  |                           |  |  |  |
| 53. | □ Accepted into an institute of higher ed  | GED, what are your future plans? (Chec ducation during the school year □ Certificate or more College Degree; □ Go to work; □ Go | program (1 year or less); |  |  |  |
| 54. | The CAREER PATHWAY I hope to   | follow is in (descriptions available on the C   | GRADS online database):   |  |  |  |
|     | Agriculture , Food & Natural Resour  | ces   |                           |  |  |  |
|     | Architecture & Construction  |   |                           |  |  |  |
|     | Arts, A/V Technology & Communica   | tions   |                           |  |  |  |
|     | <b>Business Management &amp; Administrat</b>   | tion  |                           |  |  |  |
|     | Education & Training   |   |                           |  |  |  |
|     | Finance  |   |                           |  |  |  |
|     | Government & Public Administration   | n   |                           |  |  |  |
|     | Health Science   |   |                           |  |  |  |
|     | Hospitality & Tourism  |   |                           |  |  |  |
|     | Human Services   |   |                           |  |  |  |
|     | Information Technology   |   |                           |  |  |  |
|     | Law, Public Safety, Corrections & Se   | ecurity   |                           |  |  |  |
|     | Manufacturing  |   |                           |  |  |  |
|     | Marketing  | 7. A  |                           |  |  |  |
|     | Science, Technology, Engineering & I   |   |                           |  |  |  |
|     | Transportation, Distribution & Lodg  | ung   |                           |  |  |  |
|     |  |   |                           |  |  |  |
|     |  |   |                           |  |  |  |
|     |  |   |                           |  |  |  |
|     |  |   |                           |  |  |  |
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|     |  |   |                           |  |  |  |
|     |  |   |                           |  |  |  |

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|     | 2013-14 NM GRADS Exit Form Continued   |   |  |  |  |  |  |
|-----|--|---|--|--|--|--|--|
|     | Student Name:  | Student ID #:   |  |  |  |  |  |
|     | GRADS Teacher:   | Today's Date:   | Povined 0/19/12  |  |  |  |  |
|     | Section 9 TO BE COMPLETED BY THE   |   |  |  |  |  |  |
| 55. | 55. Date participant EXITED from GRADS or  | Date of School End:   |  |  |  |  |  |
| 56. | 56. Was student a "Drop-Out" recruited to GR   | ADS this year? □ Yes; □ No  |  |  |  |  |  |
| 57. | 57. Did this student have a Repeat Pregnancy th  | his year after enrollment into GRADS?   | ' □Yes; □ No   |  |  |  |  |
| 58. | 58. If Yes, was it over the Summer? □ Yes; □ N   | No; Was it within 18 months of a previ  | ious birth? □Yes; □ No   |  |  |  |  |
| 59. | . Will the student be enrolled in GRADS next year? □ Yes; □ No; □ Probably  If no, indicate the reason why: □ Graduated; □ Academic reasons; □ Transferred to another school; □ Moved out of District; □ Dropped out of school; □ Pressure from partner / family; □ Expelled; □ Had to work to support child/family; □ Was incarcerated; □ Medical issues related to pregnancy; □ Post graduate; □ Enrolled in GED program; □ Earned GED □ Other   |   |  |  |  |  |  |
| 60. | <b>60. Did the student successfully complete the ac</b> graduate   | . Did the student successfully complete the academic requirements for the school year?   —Yes;  — No;  — Post graduate  |  |  |  |  |  |
| 61. | 61. Does the student need to repeat the school y   | year? □Yes; □ No; □ Post graduate   |  |  |  |  |  |
| 62. | 62. Did the student graduate from high school o  | or earned GED? □Yes; □ No   |  |  |  |  |  |
| 63. | 63. If Yes, has the student been accepted into a   | Institute of Higher Education? □Yes;  | □ <b>No</b>  |  |  |  |  |
| 64. | 64. Did the student show SCHOLASTIC ACHIE  | EVEMENT? □Yes; □ No; □ Post gradua  | te   |  |  |  |  |
| 65. | <b>65.</b> If Yes, how? Check all that apply: □ Mainta □ Graduated; □ Earned GED.  | nined GPA; □ Improved GPA; □ Advance  | ed to next grade;  |  |  |  |  |
| 66. | □ Was expelled or suspended; □ Health issue  | If student <i>DID NOT</i> show academic progress, <i>WHY not</i> ? □ Poor Attendance; □ Legal Issue; □ Was expelled or suspended; □ Health issues-Self or child; □ Relationship Issues; □ Needed tutoring; □ Language problem; □ Other- Explain |  |  |  |  |  |
| 67. | 67. SPECIAL POPULATIONS:   Not Applicate   | ble (NA); □ Special Education student;  |  |  |  |  |  |
|     | ☐ English as a Second Language (ESL); ☐ Fre  | ree/reduced cost meals; □ other.  |  |  |  |  |  |
| 68. | G8. Check all the services that the student recei  □ Parenting Skills Information; □ Healthy Rela Visitation Services; □ Transportation; □ Conce (including job training, career counseling, resume v credit recovery, individualized graduation plans, fle registration and enrollment, school re-enrollment as application assistance, dropout prevention services)  | lationship information;   Case managemerete Support (food, housing, clothing, furni writing assistance);   Educational Support (exible scheduling, homebound instruction for assistance, college application assistance, final                  | ture);   Vocational Services  (including tutoring services, or extended absences, GED  Ancial aid resources or |  |  |  |  |
|     | 69. Document the NUMBER of times for each of # In-School Conferences;# Conferences;# Hospital and the second of the second of times for each of times for ea | Off-Campus visits/activities (not at stude bital Visits (NA if no birth); # of ited in (domestic violence presentations, j  | Referrals to services;   |  |  |  |  |

Teacher