

# INITIAL STUDENT REPORT

**ESOL**

Student's Name \_\_\_\_\_  
(last) (first) (middle initial)

Address \_\_\_\_\_  
(street) (town) (zip code)

Telephone (day) \_\_\_\_\_ OK to call? \_\_\_\_\_ OK to mail? \_\_\_\_\_ DOB \_\_\_\_\_

Country of Birth \_\_\_\_\_ Last Grade Completed \_\_\_\_\_ Sex: M \_\_\_ F \_\_\_

<u>AGE:</u>	<u>ETHNIC GROUP:</u>	<u>EMPLOYMENT STATUS:</u>
16-24 _____	Native American _____	Full-time _____
25-35 _____	Asian _____	Part-time _____
36-45 _____	Pacific Islander _____	Unemployed _____
46-55 _____	African American _____	Disabled _____
56-65 _____	Afro-Caribbean _____	Retired _____
65+ _____	African _____	Not in Labor Market _____
	Latino _____	Other _____
	White _____	

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