

e-Data V-2 Staff Maintenance Intake/Exit

Prefix \_\_\_\_\_ \*First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ \*Last Name \_\_\_\_\_

Suffix \_\_\_\_\_

\*Staff Type  Fully Division Funded  Partially Division Funded  Other Funded  None

\*Volunteer  Yes  No \*Employment Status  Full time  Part time

\*Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

\*Ethnicity

\*1. Are you Hispanic/Latino?  Yes  No

\*2. What is your race? (If applicable choose one or more)

- American Indian or Alaskan Native
- Black or African American
- White (not Hispanic)
- Asian
- Native Hawaiian or other Pacific Islander

\*Gender  M  F

\*Address 1 \_\_\_\_\_

Address 2 \_\_\_\_\_

\*City \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip Code \_\_\_\_\_ Zip+4 \_\_\_\_\_

\*County \_\_\_\_\_

Email address \_\_\_\_\_

Home Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Call Home  Yes  No

Cell Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Call Cell  Yes  No

Work Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Extension \_\_\_\_\_ Call Work  Yes  No

Certification (Report for paid teachers only; select all that apply)

Adult Education  K-12  Special Education  TESOL  No Certification

Teacher's Years of Experience in Adult Education (Report for paid teachers only; select one)

None  Less than one year  1 to 3 years  3 or more years

Adult Education Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\*Education Level

No Diploma  Technical/Business School Certificate

Secondary School Diploma/Equivalent  Associate's Degree

Some College Courses  Bachelor's Degree

Master's Degree

Doctoral Degree

\*Primary Position

Administrator  Counselor

Adult Educator  Data Entry/Clerical

Adult Education Paraprofessional  Early Childhood Educator

Case Manager  Early Childhood Paraprofessional

Coordinator  Parent Educator

Status  Active  Inactive  Completed

\*Start Date for Agency this year \_\_\_\_/\_\_\_\_/\_\_\_\_ Program Exit Date \_\_\_\_/\_\_\_\_/\_\_\_\_

AASD/Community Ed. Center  
Stevens Building  
200 E. Crawford Ave.  
Altoona, PA 16602

TUTOR SUPPLEMENT

Please PRINT!

What days and times of day do you have available to tutor, generally? (This is just to help us consider your schedule when matching you with a student.)

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If you work, what shift do you typically work? \_\_\_\_\_

What libraries are you willing to tutor in? Please indicate the one or two you can easily get to from your home or workplace that you'd be willing to use.

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3 References of people who are not related to you, that have known you for 3+ years. Include Name, Address with Zip Code, Daytime Phone.

1) _____	2) _____
_____	_____
_____	_____
_____	_____
3) _____	
_____	
_____	

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Emergency Contact: Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Phone \_\_\_\_\_