



<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Arabic <input type="checkbox"/> Cambodian <input type="checkbox"/> Chinese <input type="checkbox"/> Farsi <input type="checkbox"/> French <input type="checkbox"/> Hmong <input type="checkbox"/> Indonesian <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Lao <input type="checkbox"/> Punjabi <input type="checkbox"/> Russian <input type="checkbox"/> Tagalog <input type="checkbox"/> Thai <input type="checkbox"/> Turkish <input type="checkbox"/> Urdu <input type="checkbox"/> Vietnamese <input type="checkbox"/> ASL <input type="checkbox"/> Other					<input type="checkbox"/> NONE <input type="checkbox"/> YES: _____ <input type="checkbox"/> NONE <input type="checkbox"/> YES: _____	
<input type="checkbox"/> Get a Job <input type="checkbox"/> Retain a Job / Get a Better Job <input type="checkbox"/> US Citizenship <input type="checkbox"/> HS Diploma / HSE <input type="checkbox"/> Enter College or Training <input type="checkbox"/> Military <input type="checkbox"/> Improve Basic Literacy Skills <input type="checkbox"/> Improve English Skills <input type="checkbox"/> Other _____						
1. Emergency Contact Person		Phone Number		Relationship to Student		
2. Emergency Contact Person		Phone Number		Relationship to Student		
