



# YESS-ILP Participant Registration Form

## Foundation for California Community Colleges

### Participant Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

County of Origin \_\_\_\_\_ County of Residence \_\_\_\_\_

Age: \_\_\_\_\_ Race/Ethnicity \_\_\_\_\_

Age Classification	Check One
Youth (16-18)	<input type="checkbox"/>
Emancipated Youth (19-21)	<input type="checkbox"/>
Non-Minor Dependent	<input type="checkbox"/>
Adult	<input type="checkbox"/>
<b>Gender</b>	
Male	<input type="checkbox"/>
Female	<input type="checkbox"/>
Other	<input type="checkbox"/>

Care Category	Check One
Foster Care	<input type="checkbox"/>
Kinship Care	<input type="checkbox"/>
Group Home	<input type="checkbox"/>
Transitional Housing	<input type="checkbox"/>
Probation	<input type="checkbox"/>
SILP	<input type="checkbox"/>
Homeless	<input type="checkbox"/>

**Education:** 8<sup>th</sup> \_\_\_\_\_ 9<sup>th</sup> \_\_\_\_\_ 10<sup>th</sup> \_\_\_\_\_ 11<sup>th</sup> \_\_\_\_\_ 12<sup>th</sup> \_\_\_\_\_ College \_\_\_\_\_

Other (please explain): \_\_\_\_\_

### Release Statement

This statistical information will be used to keep accurate records of the services provided by the community college YESS-ILP program. This information will assist the college in keeping accurate records of the classes that you take. It will also help the college to keep you informed of upcoming classes and events within the ILP at your local community college. Your name, address, and phone number will remain confidential. Statistical numbers (demographics - i.e., gender and education - not names) may be reported to funding agencies. No unauthorized person will have access to your information.

Signature \_\_\_\_\_

Date \_\_\_\_\_

