



# English Conversation Class/Literacy Plus 2020-21 Registration Form

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Male/Female \_\_\_\_\_  
Address: \_\_\_\_\_ Apt #: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Cell/Home #: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ First Language: \_\_\_\_\_  
Last Grade Completed: \_\_\_\_\_ High School Diploma: Yes/No How Heard: \_\_\_\_\_

## Emergency Contact Information

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## Demographic Information:

### Household Size (Number of persons in family)

Check one box

- |                                    |   |
|------------------------------------|---|
| <input type="checkbox"/> 1 person  | <input type="checkbox"/> 6 persons      |
| <input type="checkbox"/> 2 persons | <input type="checkbox"/> 7 persons      |
| <input type="checkbox"/> 3 persons | <input type="checkbox"/> 8 persons      |
| <input type="checkbox"/> 4 persons | <input type="checkbox"/> Over 9 persons |
| <input type="checkbox"/> 5 persons |   |

### Household/Family Income Summary

Check one box

- \$39,150 or below family income
- \$65,250 or below family income
- \$104,400 or below family income
- \$137,850 or **above** family income

### Ethnicity Check one box

#### Hispanic: Yes / No

- |   |  |
|---|--|
| <input type="checkbox"/> White                            | <input type="checkbox"/> American Indian/White |
| <input type="checkbox"/> Black/African American           | <input type="checkbox"/> Asian/White           |
| <input type="checkbox"/> Asian                            | <input type="checkbox"/> Black/White           |
| <input type="checkbox"/> American Indian/Alaskan Native   | <input type="checkbox"/> American Indian/Black |
| <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> Other/Multi-Racial    |

### Check reasons for studying English

<input type="checkbox"/> Improve Speaking Skills	<input type="checkbox"/> Get a Job/Better	<input type="checkbox"/> Personal Goal	List:
<input type="checkbox"/> Improve Reading Skills	<input type="checkbox"/> GED	<input type="checkbox"/> Family Goal	
<input type="checkbox"/> Improve Writing Skills	<input type="checkbox"/> U.S Citizenship	<input type="checkbox"/> Other	

To the best of my knowledge the information above is correct and I fully understand that the information provided will be shared with the Library and Community Services Department of the City of Hayward.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_