Every individual has a rich story and history, which cannot be told by their demographic information alone. However, this information is helpful to understand more about the individuals in our region who are pursuing or exploring a career in early childhood education. This information will be used to evaluate and improve our outreach and services.

Please provide the following basic enrollment information.

|  |  |
| --- | --- |
|  | **Preferred Language**: [Type here] |
| **First and Last Name:**[Type here]  | **Date of Birth:** [Type here] |
| **Residential Address**:[Type here] | **Phone number**: [Type here]  |
| **Email**: [Type here]  |
| **Gender**:☐ Woman☐ Man☐ Non-binary orGenderqueer☐ Prefer Not to Answer | **Sex**:☐ Female☐ Male ☐ I prefer not to disclose |
| **Race**:☐ American Indian or Alaskan Native☐ Asian☐ Black or African American☐ Native Hawaiian☐ Other Pacific Islander☐ White☐ More than one race | **Additional race and ethnicity information:**☐ African☐ Arab ☐ Hispanic or Latinx/a/o☐ Latinx/a/o of Indigenous Descent☐ Middle Eastern ☐ Slavic ☐ None Apply☐ I prefer not to disclose |
| **Please check any that apply to you:**☐ Veteran ☐ Parent/guardian of a child aged 3-5 years old☐ Person with a disability ☐ Immigrant/migrant to United States☐ Refugee status ☐ I speak a first language other than English |
| **Past Experience in Early Childhood Education Work:**Have you worked in early childhood education in the past?☐Yes☐No If yes, please complete the following:What role or position did you have?☐ Teacher assistant/aide/floater☐ Teacher/Lead☐ Assistant director☐ Substitute☐ Other What was the location?☐ Multnomah County☐ Washington County☐ Clackamas County☐ Clark County, Washington☐ Other, in Oregon☐ Other, outside Oregon | **Education history**:☐ Currently in high school☐ High school diploma☐ GED☐ Associate degree (AA)☐ Bachelor’s degree☐ Master’s degree☐ Currently in school for:[Type here]☐ Other: |
| **What are your current career goals?** Please check all that apply.☐ Explore a career in early childhood education☐ Begin a career in early childhood education☐ Re-enter a career in education☐ Take training or college courses to prepare for a career☐ Earn a college degree |

My signature below indicates that I certify the information on this application is true to the best of my knowledge as of the application date. In order to provide you with the best service and support possible, partners within the WorkSource system may exchange information about your participation in program services. By signing this registration form, you give your consent to the sharing of this information between the WorkSource partners.

Applicant name, printed: Date: [Type here]

[Type here]

(If participant is under 18 years old) Parent/Guardian Name

[Type here]

Parent/Guardian Signature X \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_