



Fast ●Forward ●

Personal information you provide may be used for secondary purposes [Privacy Law, s 15.04(1)(m) Wis. Stats.] All information will be kept confidential, secure and used only to analyze enrollment patterns, ensure equal access to the program, and evaluate program effectiveness.

Trainee Name:							
First				Middle Initial	I	Last	
DOB: Social Security Number:							
					_	- –	
MM DD YYYY County of Residence: Gender: Mala Example							
				Gender:	Male 🔲 Fe	male 🔲 Undisclosed	
Race: 🛛 🗌 American Indian			Black/	African America	an	🔲 White	
Asian			🔲 Hawaiian Native Pacific Islander			Cother	
Unknown/Undisclosed							
Ethnicity: C) Hispanio	С	C Non	-Hispanic	с u	Indisclosed	
Ex-Offender?		Tes	No No	Unknc	wn/Undisclose	d	
First-Time Gra	duate?	Tes	🗖 No	Unknc	wn/Undisclose	d	
Veteran?		Tes	No No	🔲 Unkno	wn/Undisclose	d	
Disability?		Tes	No No	🔲 Unkno	wn/Undisclose	d	
Employment S	tatus:	Employed		Not Employed			
Employment Type Before Training:							
Employment H	ours Befo	ore Training:	Part-time	Full-Time	e 32 or more ho	urs per week	
Hourly Wage before Training:							
Name of Pre-training Employer:							
Trainee Classification:							
Unemployed Underemployed Incumbent - New Hire Incumbent - Existing							