MICHIGAN DEPARTMENT OF LABOR & ECONOMIC OPPORTUNITY | **EMPLOYMENT & TRAINING**

Eligibility Form

The Eligibility Form should be completed each program year during the participant's registration period and attached to the Adult Learning Plan. All information is to be completed for the specific program year identified.

* = Required Field

Program Year: _____

Provider Information
*Provider Name: _____
*Local Student Number: _____   UIC Number: _____

Participant Information (Update address and contact information if it is different from the Adult Learning Plan)
*First Name: _____   *Last Name: _____   *Middle Initial: _____
Maiden Name: _____   Social Security Number: _____   *Sex: ☐ Male ☐ Female
Street Address: _____   ☐ Check if no address
City: _____   State: _____   Zip Code: _____
County: _____   *Email Address: _____
*Phone Number: _____   Alternate Phone Number: _____

Alternate Contact Information
First Name: _____   Last Name: _____
Relationship to the Participant: _____
Street Address: _____
City: _____   State: _____   Zip Code: _____
Phone Number: _____   Email Address: _____

Instructional Area	**Funding Eligibility**	
*Select all that apply: ☐ Adult Basic Education (0-8.9) ☐ Adult Secondary Education (9-12) ☐ English as a Second Language ☐ High School Diploma (must meet MMC requirements) ☐ High School Equivalency	*Select all that apply: ☐ WIOA General Instruction ☐ WIOA Institutional ☐ WIOA IELCE ☐ State School Aid-Section 107 ☐ Section 107 Special Programs	☐ Section 107 Supplemental ☐ Futures for Frontliners ☐ 23+ ☐ Other: _____

Program Type		
*Select all that apply: ☐ Correctional Facility ☐ Community Correctional Program ☐ Other Institutional Setting ☐ Family Literacy Program	☐ Workplace Literacy Program ☐ HSE to School ☐ None of the above	☐ Integrated Education and Training Training Type: _____ Provider: _____ Postsecondary Level Training: ☐ Yes ☐ No

High school diploma credits at entry	
Number of transferrable High School Diploma credits previously earned	_____
Number of credits required for completion of High School Diploma by district	_____
Number of High School Diploma credits earned during program year	_____

# of official HSE tests passed at entry		**# of official HSE Tests passed during program year**	
GED	HiSET	GED	HiSET
_____	_____	_____	_____