



Passport Enrollment Form

Date: _____

CONTACT INFORMATION: PLEASE PRINT CLEARLY

Name (first) _____ (M.I.) _____ (last) _____

Address (street) _____ (apt./unit) _____

(city) _____ (state) _____ (zip code) _____ (county) _____

Phone _____ Indicate preferred contact method: ☐ Cell ☐ Text ☐ Email

Email (print clearly) _____

OUTREACH & RECRUITMENT INFORMATION:

How did you hear about ANEW?

- ☐ Friend/Family
- ☐ Pre-Apprenticeship program
- ☐ Apprenticeship program
- ☐ Union
- ☐ Social media (indicate) _____
- ☐ WorkSource

- ☐ Craigslist
- ☐ Port Jobs
- ☐ DOC
- ☐ Event (name): _____

PROGRAM INFORMATION:

Are you interested in an apprenticeship in the building and construction trades?

Yes No

If yes, which field are you interested in exploring or applying to (please check all that apply):

Electrician	HVAC
Iron Worker	Painter
Pile Driver	Carpentry
Plumbing/Pipefitting	
Laborer	
Elevator Mechanic	
Other:	

What is your potential start date:

Are you interested in an Apprenticeship in another field? (Please check all that apply):

Culinary
Landscape
Medical/Behavioral Health
Cosmetology
Aerospace
Automotive Service Technician
Software and Technology
Firefighter
Education
Other:

What is your potential start date:

SELF IDENTIFICATION INFORMATION:

Date of Birth: _____

Age: _____

What is your Household size (including yourself)? ☐ 1 2 3 4 5 ☐ +6

Do you have children or dependents? ☐ Yes ☐ No **If yes, how many?** _____

What are their ages?

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

What is your current household type?

- ☐ Single adult
- ☐ Single minor
- ☐ Couple, no children

- ☐ One parent family
- ☐ Two parent family
- ☐ Foster family

What is your current living situation?

- ☐ Rent house or apartment
- ☐ Own residence
- ☐ Transitional/temporary housing
- ☐ Work release (completion date: _____)

- ☐ Couch surfing
- ☐ Live in a public housing community or shelter
- ☐ Homeless

Have you experienced homelessness at any time within the last year, including currently?

(more than one night staying at a hotel, motel, staying at a shelter or temporary housing program, couch surfing, sleeping in a car, a park, campsite or on the street, doubled up with another family due to hardship, or in a residence with inadequate facilities (i.e. no heat, water, electricity).

☐ Yes ☐ No

Are you currently or have you ever been in foster care?

- ☐ Yes, before the age of 13
- ☐ Yes, after the age of 13
- ☐ No
- ☐ I do not know

Can you speak English ☐ Yes ☐ No

Can you read and write English ☐ Yes ☐ No

What is the primary language spoken in the home, if other than English?

- | | |
|----------------------------------|---------------------------------------|
| <input type="checkbox"/> Amharic | <input type="checkbox"/> Somali |
| <input type="checkbox"/> Arabic | <input type="checkbox"/> Spanish |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Tagalog |
| <input type="checkbox"/> Korean | <input type="checkbox"/> Ukrainian |
| <input type="checkbox"/> Punjabi | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Russian | <input type="checkbox"/> Other: _____ |

Are you currently receiving any of the following services? (Please check all that apply)

- ☐ SNAP/food stamps
- ☐ Unemployment
- ☐ TANF / WorkFirst ☐ Yes ☐ No
- ☐ SSI/SSDI
- ☐ Receive government assistance for housing
- ☐ Other support services please name organizations: _____
- ☐ I DO NOT receive any of the services above

How do you identify?

- ☐ Male
☐ Female

- ☐ Transgender
☐ Non-binary

- ☐ Other: _____
☐ Prefer not to disclose

How do you identify?

- ☐ Heterosexual (Straight)
☐ Gay
☐ Lesbian

- ☐ Bisexual
☐ Other: _____
Prefer not to disclose

How do you best describe yourself?

- ☐ American Indian/Alaska Native
☐ Asian
☐ Black or African American
☐ Native Hawaiian or Pacific Islander

- ☐ White
Hispanic, Latino, Spanish origin
☐ More than one race
☐ Prefer not to disclose

Additional Questions

- Do you have challenges understanding math or written instructions? ☐ Yes ☐ No
– Do you have a disability or require accommodations for a medical condition? ☐ Yes ☐ No
– Are you currently or have you in the last 12 months received mental healthcare? ☐ Yes ☐ No
– Are you currently or have you in the last 12 months received care for drug or alcohol addiction? ☐ Yes ☐ No
– I prefer not to disclose this information ☐ Yes

Do you have a driver's license? ☐ Yes ☐ No

What is your Driver's License status?

- ☐ Valid
☐ Suspended
☐ Never Licensed

If yes? State: _____ Driver's License Number: _____

If suspended, please explain: _____

What is your current status?

- ☐ Citizen
☐ Legal Resident
☐ Immigrant
☐ Refugee

Are you a Veteran?

- ☐ Yes
☐ No
☐ Spouse of eligible veteran

EDUCATION INFORMATION:**What is your education status? (Check ALL that apply)**

- ☐ Currently attending high school or GED program
☐ 9th-12th grade, no diploma or GED
☐ HS Diploma
☐ GED Certificate
☐ Some College
☐ Associate degree
☐ Technical or Vocational certificate
☐ Bachelor's degree
☐ Masters or Doctoral degree

High School Name:

City:

Graduation Date (if applicable):

GED Institution Name (if applicable):

Completion Date:

Do you have access to your transcripts?

- ☐ Yes
☐ No

COURT INVOLVEMENT: *Please note we ask these questions to better assist you with placement into employment.*

Have you ever been justice involved (juvenile or adult)? ☐ Yes ☐ No

If yes, select from below

- ☐ No
☐ Yes, juvenile justice involved
☐ Yes, misdemeanors only
☐ Yes, misdemeanors and felony
☐ Yes, felony only

Do you have any pending court dates for any matters? ☐ Yes ☐ No

If yes, please list: _____

Are you currently on probation or in Work Release? ☐ Yes ☐ No

If yes, please provide following:

County: _____ Duration (till when?): _____

Probation Officer/CO: _____ Phone: _____

Do you have check in requirements with your PO/CO? ☐ Yes ☐ No

If yes, how often? _____

EMPLOYMENT HISTORY:

What is your current employment status?

- ☐ Employed - full-time
☐ Employed - part-time
☐ Employed - seasonal
☐ Currently on unemployment
☐ Not employed – looking for work
☐ Other: _____

Current or most recent employment

Employer:		Starting Hourly Wage:	
City, State:		Ending Hourly Wage:	
Job title:		Hours Worked Per Week:	
Start date (Month/Year):	End date (Month/Year):	Reason for Leaving:	

EMERGENCY CONTACT:

Name (first) _____ (M.I.) _____ (last) _____

Address (street) _____ (apt./unit) _____

(city) _____ (state) _____ (zip code) _____ (county) _____

Phone _____ Email _____

Relationship to you _____

INFORMATION VERIFICATION STATEMENT:

Please read and initial the statements below and provide your signature and date.

_____ *I certify that the information provided is true to best of my knowledge. I am also aware that the information I have provided is subject to review and verification by ANEW staff, and I may have to provide documentation to support the information provided.*

_____ *I allow release of this information for verification purposes and understand that it will be used to determine eligibility of services. I understand that receiving services is subject to availability of funding and that training and/or services are not guaranteed to me.*

_____ *My initials indicate my willingness to be screened through Washington State Connections and allows the release of this information to ANEW staff for program monitoring, verification, additional data collection, and evaluation purposes.*

_____ ***My personal information will not be provided to any outside person or agency except where needed to determine eligibility for related programs or grant reporting purposes. Information provided on this form will not affect any benefits I am already receiving from other agencies.***

NON-DISCRIMINATION POLICY:

ANEW follows the equal opportunity employment and training policy and does not discriminate on the basis of race, creed, color, ethnicity, national origin, religion, sex, sexual orientation, gender expression, age, physical or mental ability, veteran status, military obligations, background, or marital status.

Signature _____ Date _____

By digitally writing in my name, I agree to have it act as my signature.