



TABE SCORE

As one of its programs, Gateway fulfills the Skillpoint Alliance mission to build partnerships among industry, education and the community, leading to college and career success for Central Texans, while meeting employers' needs for a qualified workforce. Gateway programs provide valuable training and job skills to those in need, quickly preparing them for entry-level employment. Gateway services are based in part on established program eligibility standards and student interview with program staff. Gateway reserves the right to refuse program enrollment to anyone.

Name: _____ Date of Application: ____/____/____
Month / Date / Year

Please select the Gateway Program you are applying for:

Healthcare

- Certified Nurse Aide
Certified Medication Aide

Construction Tech

- Construction
Plumbing
Electrical
HVAC

Office

- Office Administration
Bookkeeping

Contact Information

Social Security Number: ____-____-____
Day Phone Number (____)____ Evening Phone Number (____)____
Email: _____
Date of Birth: ____/____/____ Age: ____ Gender: Female [] Male []
Month / Date / Year

Referral Source

How did you hear about our program?
[] Friend/Relative [] Flyer/Brochure [] ACC
[] Workforce Center [] OWD/Travis County [] Other _____
Have you ever been enrolled in any other Skillpoint Alliance Program? Yes [] No []

Personal Information

Please select your ethnicity: (You must select one.)
[] Hispanic or Latino [] Not Hispanic or Latino
Please Select your Race: (You must select at least one; select all that apply.)
[] African American or Black [] Pacific Islander
[] Alaskan Native [] White
[] American Indian [] Native Hawaiian
[] Asian [] Other _____
Marital Status: [] Single/Never Married [] Married [] Divorced [] Widowed [] Civil Union
Do you have a child/children? Yes [] No []
If yes, are you the: [] Custodial parent [] Non-Custodial Parent

Program Eligibility Information

Applicants for all Gateway programs must provide proof of eligibility to work in the United States prior to acceptance into the program.

Are you a U.S. Citizen? Yes No

If No please explain: _____

If you are not a U.S. Citizen, do you have proper documentation to work? Yes No

If male, have you registered for the Selective Service? Yes No

Have you ever served on active duty in the U.S. Military Service? Yes No

If yes please list dates of service: From: ___/___/___ To: ___/___/___

Were you discharged or retired because of a service connected disability? Yes No

Did you receive an honorable discharge? Yes No

If other please explain: _____

Are you one of the following:

- Active Duty Spouse
- Active Duty Dependent
- Surviving Spouse
- Surviving Dependent

Do you have a high school diploma or GED? Yes No

Date Graduated/GED Completed(month/year) : ___/___

Case manager/Counselor (example: Project RIO, Goodwill) information:

Program: _____ Counselors Name: _____ Phone No. _____

Have you ever been convicted of a felony? Yes No Release Date: _____

If yes, please explain: _____

*Note: Applicants for Gateway Healthcare are **required** to pass a criminal background check prior to acceptance into the program.*

Employment Information

Are you currently: Employed Unemployed Temporary Never worked

Please provide the following information for the last three positions you held:

Position Title _____ Start Date: ___/___/___ End Date: ___/___/___

Position Title _____ Start Date: ___/___/___ End Date: ___/___/___

Position Title _____ Start Date: ___/___/___ End Date: ___/___/___

Knowledge, Skills and Abilities

Please describe any additional, relevant work related information, skills, abilities, certifications or licenses related to the program you are applying for: _____

FOR OFFICE USE ONLY