Adult Education
In South Carolina
Educating • Empowering • Employing

Horry County **Returning Student Data Form** 2026-2027

For remote registration, please complete this form, save to your device, and email to lcollins001@horrycountyschools.net

For Office Use Only:

Return Year: _____ Program/ Class: _____

_____ _____ _____ _____

Last Name **First Name** **Middle Name** **DOB**

Address: _____ City: _____ SC ZipCode:_____

Mobile Phone: _____ Other Phone:_____

Email: _____

Employment Status: Check only one box to indicate employment status.

☐ Employed Full-time	☐ Employed Part-time	☐ Unemployed & looking for work
☐ Unavailable for work/ Disabled	☐ Retired	☐ Unemployed but **not** looking for work

If employed, what is your occupation/ position? _____

How long have you been employed in this current position? _____

Have you passed any subject of the **official** GED exams? ☐ Yes ☐ No

If yes, please check which subject(s) you passed? ☐ RLA ☐ Math ☐ Science ☐ Social Studies

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Adult Education Barrier Assessment

2026-2027

Students: Please read each statement below and check the box next to all statements that apply to you.

1. ☐	I need to improve my academic skills (reading, writing, or math).
2. ☐	I don't have a high school diploma.
3. ☐	I don't feel part of American culture or society, in general.
4. ☐	I feel that my beliefs, religion, or other personal lifestyle choices are keeping me from a job.
5. ☐	I have a physical disability.
6. ☐	I have been diagnosed with or believe I have a learning disability.
7. ☐	I have an emotional or mental health issue.
8. ☐	I lost my last job due to a lay-off, downsizing, lack of work, or shutdown.
9. ☐	I was terminated from my last job.
10. ☐	I've been dependent on another person's income (homemaker, etc.) and now need to get a job.
11. ☐	It's hard to make ends meet with my income.
12. ☐	I'm not fluent in the English language.
13. ☐	I have a felony on my record.
14. ☐	I'm on probation or parole.
15. ☐	I currently receive or within the past 6 months have received TANF.
16. ☐	I'm currently in foster care or have recently "aged out" of foster care.
17. ☐	I live with a family member or friend and/or I don't have a permanent place to live right now.
18. ☐	I've been unemployed for more than 6 months.
19. ☐	I don't read very well.
20. ☐	I or my family travel to or relocate where farming jobs are available.
21. ☐	I or my family work seasonal farm work.
22. ☐	I or my children have Medicaid Insurance.
23. ☐	I currently receive or within the past 6 months have received SNAP benefits (formerly food stamps)
24. ☐	I currently receive or within the past 6 months have received WIC benefits for myself or my children.
25. ☐	I live in public housing or receive rental assistance.
26. ☐	I receive Social Security Insurance benefits for myself or my children.
27. ☐	I'm a single, separated, divorced, or widowed parent with primary custody of children under 18.
28. ☐	I am a parent/guardian with a child(ren) 8 years of age or under.
29. ☐	I'm receiving services form SC Vocational Rehabilitation Services.
30. ☐	I'm receiving unemployment benefits.
31. ☐	I don't have a driver's license.
32. ☐	I don't have a birth certificate.
33. ☐	I don't have a social security card.
34. ☐	I don't always have transportation when I need it.
35. ☐	I don't have reliable childcare.
36. ☐	I'm caring for a sick or disabled family member or friend.
37. ☐	I have a difficult work schedule. (long or odd hours, rotating shifts, etc)
38. ☐	I move often to a different house or town.
39. ☐	I receive assistance through SC Works (One-Stop), and or WIOA (Adult or Youth).

Student Signature: _____ **Date:** _____