

# Career Pathways Student Report



## Instructions for completing and submitting this report:

1. This is an electronic report and should be completed using ONLY [Adobe Reader](#), not using paper and pencil. Do not use any other type of PDF reader because the data will not be extracted.
2. Be sure the document you are using is for the current program year and save each document as an ADOBE PDF. Use an abbreviation of your program name and assign a number for each of the reports you submit (Example: PSU1, PSU2, PSU3)
3. Collect, enter, and update student data as needed throughout the program year.
4. All reports must be electronically submitted by June 21, 2024, unless other arrangements have been made.
5. If you have any questions, need clarification, or to submit reports, please contact Loretta Lininger at [lml160@psu.edu](mailto:lml160@psu.edu).

## 1. Student Information

Student's county of residence

If student was not born in U.S., indicate student's home country.

Student enrollment hours

Did the student begin career pathways programming in a correctional facility and complete it in the community?

- Yes  No  Unsure  N/A

Adult education programming in which student participated:

*Note: If the student participated in an IELCE program, complete the IELCE Student Report instead.*

- ABE only  
 ESL only  
 ESL and ABE

PDE-approved Educational Functioning Level (EFL) standardized assessment:

Pre-assessment EFL

Post-assessment EFL

If not assessed for posttest, please indicate reason why:

- No assessment needed  
 Not yet assessed  
 Not assessed – left program  
 Not assessed – met exit level criteria for ESL  
 Other

Did the student have [Measurable Skill Gains \(MSG\)](#) as determined by a PDE-approved standardized assessment or other approved methods of determining MSG?

- Yes  No  Unsure  N/A

Which best describes why the student initially enrolled in the adult education program? (Choose only one.)

- Enter postsecondary education or training  Earn a credential  
 Obtain employment  Retain employment  
 Improve English language proficiency  Other (Describe below.)

## 2. Career Awareness and Exploration Activities

**Informal career assessments student completed (Check all that apply.)**

- Barrier Assessment
- Career Information Checklist
- Career Interest Assessment (e.g., O\*NET®, Pennsylvania Career Guide)
- Information assessment
- Informational interview
- Prior occupation held in the United States or home country
- Other (Describe below.)

**Target occupation/job title identified by student during initial goal setting.**

**Target industry sector of the occupation identified by the student at initial goal setting.**

**Is this an industry sector that is the focus of the [Local Workforce Development Area Plan](#)?**

- Yes    No    Unsure

## 3. Student Supports

**Indicate funding or other support the student received (e.g., training, testing fees, transportation, clothing).**

(Check all that apply.)

- |   |   |
|---|---|
| <input type="checkbox"/> Correctional program (e.g., county jail, drug court, daily reporting center, work release) | <input type="checkbox"/> Community organization   |
| <input type="checkbox"/> Drug and alcohol program   | <input type="checkbox"/> Emergency assistance (e.g., heating, rent, utilities)                |
| <input type="checkbox"/> Financial Aid (e.g., FAFSA®, Federal Pell Grant®, PHEAA®)                                  | <input type="checkbox"/> Food pantry  |
| <input type="checkbox"/> Homeless shelter program   | <input type="checkbox"/> KEYS – Keystone Education Yields Success                             |
| <input type="checkbox"/> Local church program (conversation circles, NA/AA meetings, etc.)                          | <input type="checkbox"/> Mental health program  |
| <input type="checkbox"/> Probation/Parole   | <input type="checkbox"/> Refugee Resettlement Program   |
| <input type="checkbox"/> SNAP – Supplemental Nutrition Assistance Program   | <input type="checkbox"/> Technology supports (e.g., provided computer, tablet, hotspot, etc.) |
| <input type="checkbox"/> Veteran services   | <input type="checkbox"/> WIC – Women, Infants and Children program                            |

Other (Describe below.)

**Was this student referred to a WIOA partner from your adult education program? (Check all that apply.)**

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> Title I - Youth                                      | <input type="checkbox"/> Title I - Adult       | <input type="checkbox"/> Title I - Dislocated Worker | <input type="checkbox"/> TAA- Trade Adjustment Act |
| <input type="checkbox"/> EARN – Employment, Advancement and Retention Network | <input type="checkbox"/> PA CareerLink® System | <input type="checkbox"/> Title IV - OVR              |  |

**Was this student referred to your adult education program by a WIOA partner? (Check all that apply.)**

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> Title I - Youth                                      | <input type="checkbox"/> Title I - Adult       | <input type="checkbox"/> Title I - Dislocated Worker | <input type="checkbox"/> TAA- Trade Adjustment Act |
| <input type="checkbox"/> EARN – Employment, Advancement and Retention Network | <input type="checkbox"/> PA CareerLink® System | <input type="checkbox"/> Title IV - OVR              |  |

**Was this student co-enrolled with your adult education program and a WIOA partner? (Check all that apply.)**

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> Title I - Youth                                      | <input type="checkbox"/> Title I - Adult       | <input type="checkbox"/> Title I - Dislocated Worker | <input type="checkbox"/> TAA- Trade Adjustment Act |
| <input type="checkbox"/> EARN – Employment, Advancement and Retention Network | <input type="checkbox"/> PA CareerLink® System | <input type="checkbox"/> Title IV - OVR              |  |

## 4. Student Transition to Postsecondary Education and Training or Employment

Did the student earn a credential prior to leaving the adult education program?

Yes  No  Unsure

↳ If yes, check all that apply:

- Commonwealth Secondary School Diploma (from passing GED® or HiSET® exam)
- Industry-recognized credential:
- Work-readiness certificate (e.g., ACT WorkKeys®, National Career Readiness Certificate, Metrix Learning® course certificate, NorthStar® Digital Literacy certificate)
- Other (Describe below.)

Did the student change the industry sector and/or occupation of focus during career pathways guidance, exploration, or support?

Yes  No  Unsure

↳ If yes, what activities led to the change and what new industry and/or occupation did the student identify?

Directions for completing sections A and B.

If the student ...	Complete the following sections:
Only transitioned to postsecondary education and training	A
Transitioned to postsecondary education and training AND employment	A, B
Only transitioned to employment	B

### A. Postsecondary Education and Training

Did the student enroll in a postsecondary education and training program?

Yes  No  N/A

Name of education and training provider

Program of study

Postsecondary education and training funding supports: (Check all that apply.)

- ITA – Individual Training Account funds
- Title II funds (IET only)
- Federal financial aid
- Self-pay
- Grants
- Other Explain:
- State financial aid
- Scholarship
- Private funding
- Unsure

Was the [Adult Student Postsecondary Enrollment Certification Form](#) completed?

Yes  No  Unsure

Which activities did the student participate in to support their transition to postsecondary education and training? (Check all that apply.)

- Postsecondary institution or training provider tour
- Financial aid workshop
- Meeting with postsecondary admissions office
- Pre-apprenticeship program
- Adult education bridge class
- Other (Describe below.)

Was this part of an Integrated Education and Training (IET) Program?

Yes  No  Unsure

## B. Employment

Was the student employed *prior to* enrolling in the adult education program?

Yes  No  Unsure

Did the student obtain employment or change employment *while enrolled* in adult education?

Yes  No  Unsure

Did the student obtain employment or change employment *upon leaving* the adult education program?

Yes  No  Unsure

Name of occupation/job title:

Industry sector:

Was the employment obtained or retained by the student directly related to an IET program?

Yes  No  Unsure  N/A

Which activities did the student participate in to support their transition to employment? (Check all that apply.)

- |  |  |
|--|--|
| <input type="checkbox"/> Work experience           | <input type="checkbox"/> Employer presentation                           |
| <input type="checkbox"/> OJT – On-the-Job Training | <input type="checkbox"/> Guest speaker                                   |
| <input type="checkbox"/> Job coaching program      | <input type="checkbox"/> Mock interview                                  |
| <input type="checkbox"/> Interview with employer   | <input type="checkbox"/> Internship (paid or unpaid)                     |
| <input type="checkbox"/> Job shadowing             | <input type="checkbox"/> Apprenticeship or pre-apprenticeship program    |
| <input type="checkbox"/> Career fair               | <input type="checkbox"/> Workshops (Resume, interviewing, etc.)          |
| <input type="checkbox"/> Worksite tour             | <input type="checkbox"/> Job search with local PA CareerLink® assistance |
| <input type="checkbox"/> Other (Describe below.)   |  |

## 5. Additional Information

Please use this space to add any additional information on how your agency or partners provided career pathways support for this student.