

OPEN DOORS [1418] YOUTH REENGAGEMENT SAMPLE ELIGIBILITY VERIFICATION FORM

ELIGIBILITY VERIFICATION FORM:*

Reengagement Program requesting information: _____

High School or District Contacted (Last School Attended or Last District Attended):

Student Name: _____ Student Birthdate: _____
Last / First /MI mm/dd/yyyy

INFORMATION BEING VERIFIED:

- ◇ Graduation Cohort _____ (Example: 2018)
- ◇ Number of high school credits attempted (per transcript as of today's date): _____
- ◇ Number of high school credits earned (per transcript, as of today's date): _____
- ◇ Withdrawal Date from previous school/program, if applicable: _____ (mm/dd/yy)

Notes: _____

SOURCE OF INFORMATION

Person Providing Information: _____

Title: _____ Phone: _____

If the above information is provided via phone:

Person Recording Information: _____

Title: _____ Phone: _____

Date of Verification: _____ (mm/dd/yy)

*THIS FORM PROVIDES TRANSFER INFORMATION IN THE EVENT THAT A TRANSCRIPT IS NOT AVAILABLE.