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CAMI Participant Exit Form

The program you are applying for is supported by a U.S. Department of Labor (USDOL) grant awarded to the Connecticut Advanced Manufacturing Initiative (CAMI). The USDOL requires that we collect personal identification, demographic and employment information on CAMI participants to comply with federal policies and assess program outcomes. Your personal information will be kept confidential but aggregated information from all applicants may be shared with Congress and state and federal agencies. (Please see page two of this application to learn more about how your data will be used and protected)

application	io icam more about non .	four data will be used and protected)		
Personal	Information			
Full Name:	:		Date:	
	Last	First	MI	
Address:				
	Street Address		Apartment/Unit #	
	C:t	State	Zip Code	
	City		·	
Home Phone:		Cell:	Email:	
Date of Birth:		Age:	Banner ID: (if known)	
Program	Outcomes			
Name of C	AMI program you enro	ılled:		
Did you co	mplete the program: \Box	Vas 🗆 No		
Did you co	implete the program.	Tes 🗆 No		
Are you planning on pursuing any of the following: □ Associate's degree □ Bachelor's □ Certificate				
If continuing education, in what area: Which college/university:				
Employ	ment Information			
Were you employed at the time you started the CAMI program: ☐ Yes ☐ Full-time ☐ Part-time ☐ No				
Employer:		Job Title:		
Are you currently employed: \square Yes \square Full-time \square Part-time \square No				
If currently employed, is this the same employment you had when you started the CAMI program:				
☐ Yes				
	New Employer:	Job Title:		
Has vour w	vages increased as a res	ult of this program: Yes :	No	
	e Contact	uit of this program. — Tes —	110	
	like to contact you in the		w questions about your experience as a in CAMI. Who can we	
		your		
Full Name:	Last	First	MI	
Home Pho	ne:	Cell:	Email:	
program par Universities	rticipation information be	tween the Connecticut Community Co her Education and the Connecticut ar	e, true and correct, and I consent to the disclosure of this and ollege Consortium and the Connecticut State Colleges and nd U.S. Departments of Labor for the purposes of maintaining	
Participant eSignature:			Date:	

Definitions and Notes

Your information is confidential. Federal laws and Connecticut State Colleges and Universities Board of Regents for Higher Education policies protect the privacy of individual social security numbers (SSN) by limiting the conditions under which they are collected, used and disclosed.

We protect your information. The Connecticut State Colleges and Universities Board of Regents for Higher Education maintain practices to ensure the security and confidentiality of your personal information, including SSN. Access to your SSN is strictly limited to those staff who have a legitimate need to use the information in the normal course of performing their duties.

Your response to these questions is voluntary, but important to help us comply with the law. Your responses will not affect your participation in the program.

Your Social Security Number. In accordance with the privacy act of 1974, you are hereby notified that the Department of Labor is authorized to collect information to implement TAACCCT. The principle purpose for collecting this information is to administer the program, including tracking and evaluating participant progress. Providing this information, including a social security number (SSN) is voluntary; failure to disclose the SSN will not result in the denial of any right, benefit or privilege to which the participants is entitled. The information that is collected on this form will be retained in the program files of the grantee and may be released to other Department official in the performance of their official duties.

We use this information to comply with U.S. Department of Labor (USDOL). Connecticut Community College Consortium was awarded a grant under the Trade Adjustment Assistance Community College and Career Training Grants Program, as implemented by the U.S. Department of Labor's Employment and Training Administration, to create, standardize and expand training opportunities to help students pursue careers and further their education in manufacturing, energy and transportation. The USDOL requires that we collect personal identification, demographic and employment information on CAMI program participants to comply with federal policies and assess program outcomes. The program outcome information in aggregate may be shared with Congress and other state and federal agencies.

We collect information to serve you and use the information we collect as permitted by law.