

# RETRAINING PROGRAM FOR IMMIGRANT ENGINEERS @ CAMBA THE COOPER UNION ALBERT NERKEN SCHOOL OF ENGINEERING

## APPLICATION FORM

Today's date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Date Year

Name (print): \_\_\_\_\_  
First Last

Address: \_\_\_\_\_  
Street Apartment  
\_\_\_\_\_  
City State Zip Code

Contact: \_\_\_\_\_  
Home Telephone Cell E-mail address

Emergency contact: \_\_\_\_\_  
Name Telephone

Social Security Number: \_\_\_\_\_ - - Alien #

Immigration Status:  Asylum  Refugee  Green Card  Other:

Country of origin: \_\_\_\_\_ Primary language: \_\_\_\_\_

Date of entry to USA: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date of legal status approval: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Date Year Month Date Year

How did you hear about this program?  
 Flyer  Word of mouth  Referral, from where?  Media, source?

Other, What? \_\_\_\_\_

### ETHNICITY AND RACE Please select the category or categories with which you most closely identify.

- Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race
- American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment
- Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
- Black or African American: A person having origins in any of the black racial groups of Africa
- Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa

**GENDER**  Male  Female  Non-binary/ third gender  Self-described: \_\_\_\_\_  Prefer not to say

**AGE** Date of birth: / / Age: \_\_\_\_\_  
Month Date Year

**TERM YOU ARE APPLYING FOR**  Fall  Spring 20\_\_\_\_\_

Courses (please visit [cooper.edu/immigrant-retraining](http://cooper.edu/immigrant-retraining) for complete course descriptions):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FAMILY AND CHILDREN**

- 5. Total number of people in household including yourself: \_\_\_\_\_  
Marital Status:  Single  Married  Separated  Divorced  Widowed
- 6. Do you have any children?  Yes  No (If NO, skip to question #7)
  - 6a. If YES, how many children live with you now? \_\_\_\_\_
  - 6b. Of the children who live with you, what are their ages? \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,

**GENERAL EMPLOYMENT HISTORY**

- 7. Have you ever been employed in the USA?  Yes  No
  - 7a. Please briefly describe your work experience IN THE USA, starting with the most recent:  
From: \_\_\_\_\_ To: \_\_\_\_\_  
Title Company/Industry Location  
From: \_\_\_\_\_ To: \_\_\_\_\_  
Title Company/Industry Location
  - 7b. Last job's wages: \_\_\_\_\_ per  Hour  Day  Week  Month  Year
  - 7c. Hours worked per week: \_\_\_\_\_
  - 7d. Employment history in your HOME COUNTRY:  
From: \_\_\_\_\_ To: \_\_\_\_\_  
Title Company/Industry Location  
From: \_\_\_\_\_ To: \_\_\_\_\_  
Title Company/Industry Location

## EDUCATION

8. Highest education completed:  Some college/vocational    Graduated?  Yes  No

Associate's Degree

Name of institution

Year of Grad

Area of Study /Speciality

Bachelor's Degree

Name of institution

Year of Grad

Area of Study /Speciality

Master's Degree     Ph.D.

Name of institution

Year of Grad

Area of Study /Speciality

9. Have you received any other educational training in USA?  Yes  No

9a. If YES, what? (specifics) \_\_\_\_\_

10. Have you attended any other job training programs in USA?  Yes  No

10a. If YES, what types of programs did you attend?  Job Readiness programs, and/or

Specific skill programs, What skill? \_\_\_\_\_

## SKILLS

11. Please list at least five professional skills/strengths (for example: cost estimation, organic chemistry)

11a. \_\_\_\_\_

11b. \_\_\_\_\_

11c. \_\_\_\_\_

11d. \_\_\_\_\_

11e. \_\_\_\_\_

## HOUSING AND FINANCES

12. Housing at intake:  Rent apartment/house     Own apartment/house

Family/friends     Homeless shelter     Other, What? \_\_\_\_\_

13. How many people do you live with (excluding roommates)? Adults \_\_\_\_\_ Children \_\_\_\_\_

How many people are you supporting in the US? \_\_\_\_\_ Outside the US? \_\_\_\_\_

14. Primary sources of income: (family, job, savings): \_\_\_\_\_

15. What is your household income (combined gross income of all people in your household, excluding roommates): \$ \_\_\_\_\_  Monthly  Yearly

16. What other sources of income are you receiving? (check all that apply)

SSI/SSD     Unemployment     Food stamps     Public assistance     Child support     VA benefits

Spouse/family income     Insurance     No other sources     Other, What? \_\_\_\_\_

17. What type of health insurance do you have for yourself?

None     Medicaid     Private/other insurance, What? \_\_\_\_\_

18. What type of health insurance do you have for your children?

Don't have children/children don't live with me/children are older

None     Medicaid     Child Health Plus     Private/other insurance, What? \_\_\_\_\_

## BARRIERS TO EMPLOYMENT

### English language Proficiency

19. Describe your English language proficiency
- Limited Working Proficiency: Able to satisfy routine social demands and limited work requirements
  - Minimum Professional Proficiency: Able to speak the language with sufficient structural accuracy and vocabulary to participate effectively in most formal and informal conversations on practical, social, and professional topics.
  - Full Professional Proficiency: Able to use the language fluently and accurately on all levels pertinent to professional needs.
  - Native or Bilingual Proficiency: Equivalent to that of a native speaker.
20. Have you attended an ESL program?  Yes  No
- 19a. If YES, for how long? \_\_\_\_\_
21. Do you need additional technical/professional English practice?  Yes  No

### Steps Already Taken towards Career Development

22. What steps have you taken towards career development? (check all that apply)
- Completed a resume
  - Searched online for positions
  - Applied online for positions
  - Networked with individuals in your field
  - Enrolled in employment assistance programs (Upwardly Global, Workforce 1, etc.)
  - Had an interview (with what company?) \_\_\_\_\_
  - Other: \_\_\_\_\_

### Computer Access and Skills:

23. Do you have a computer with internet connection at home?  Yes  No
- Microsoft Word:  Beginner  Intermediate  Advanced
- Microsoft Excel:  Beginner  Intermediate  Advanced
- Other computer skills: \_\_\_\_\_

I certify that all information given in this application, supporting documents, and interviews are correct to the best of my knowledge. I understand that any false information, omissions or misrepresentations of facts called for in this application may disqualify my application.

Signature \_\_\_\_\_

Date \_\_\_\_\_



# RETRAINING PROGRAM FOR IMMIGRANT ENGINEERS @ CAMBA THE COOPER UNION ALBERT NERKEN SCHOOL OF ENGINEERING

## AGREEMENT | NOTICE OF CHANGES

I, (Last Name, First Name)

---

a participant of Cooper Union Retraining Program for Immigrants, promise to notify in writing The Cooper Union within thirty (30) days of any change in my address, telephone number, employment status, salary, employer's name and/or location.

I understand that this information will be confidential and is to be used only for statistical purposes to support Retraining Program for Immigrants

I understand that this information, especially job-related data, is critical to the Program's ability to continue offering free classes.

Signature:

---

Date:

---



# RETRAINING PROGRAM FOR IMMIGRANT ENGINEERS @ CAMBA THE COOPER UNION ALBERT NERKEN SCHOOL OF ENGINEERING

## PERMISSION AND RELEASE

In consideration of my participation in CAMBA programs, events or activities, I irrevocably give permission to CAMBA to utilize my name, voice, statements, photograph, image, likeness, actions, biographical data, artwork, written work or other work, in any media, developed or presented by me or with respect to which I have rights or claims, in connection with any CAMBA program or activity in video footage, print display or other transmission or reproduction, in whole or in part, for broadcast, promotional, commercial, sales related or other uses deemed suitable by CAMBA, in perpetuity worldwide, in any media whether now known or hereafter created without any additional consideration. I hereby release CAMBA from any and all claims, damages, liabilities, costs and expenses which I now have or hereafter have by reason of any use thereof. I further indemnify CAMBA against any and all claims, damages, liabilities, costs and expenses arising out of the use of ideas and words expressed by me.

### I AGREE AND ACCEPT THE ABOVE CONDITIONS:

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

