

## Instructions for Completing the Adult Enrollment/Exit Forms

With individual learners, the NEA should complete both forms by interviewing the participant. With group learners, the NEA should guide the participants through the completion of the forms, being sensitive to issues such as low literacy.

All adult participants must have a CNEP Adult Enrollment Form, 24-Hour Food Recall and CNEP Survey to be enrolled in CNEP programs.

**Missing information on the forms has the potential to waste time. To avoid incomplete forms NEAs should:**

- ***Complete the forms while interviewing individual participants.***
- ***Guide group participants through the process of completing the forms. Read each section in a slow and measured manner.***
- ***Ask the participants to review the form, section by section, before the forms are gathered.***
- ***Review each form for missing information before leaving the participants.***
- ***Review each form one last time before submitting to unit secretary.***

File and process forms as instructed by Area Coordinator.

<b>CNEP Adult Enrollment Form (FS-A101)</b>
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1. **Participant Demographics:**

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|----------------|--|
| <b>Name</b>    | Enter participant's first and last name.   |
| <b>Address</b> | Enter participant's complete <b><i>physical</i></b> address. All addresses must include a zip code. No P.O. Box numbers accepted.<br><b><u>Unit Secretaries: Only addresses of EFNEP participants may be verified.</u></b> |
| <b>Phone</b>   | Enter phone number where participant can be reached. Include area code.  |
| <b>Age</b>     | Enter participant's current age.   |
| <b>Gender</b>  | Indicate participant's gender.   |

2. **Maternal Information**

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|----------------------|--|
| <b>Pregnant</b>      | Indicate status at time of enrollment. |
| <b>Breastfeeding</b> | Indicate status at time of enrollment. |

3. **Residence** Indicate choice which describes participant's place of residence.
4. **Education** Indicate last grade completed by participant.
5. **Income** Enter total income\*\* for all persons in the household for the previous month. **Unit Secretaries: If participant indicates "\$0" enter \$1 in CRS5. If this field is left blank enter N/S (Not Supplied) in CRS5.**

*\*\*Include wages, salaries, social security, public assistance, insurance payments, pensions, and cash support from others. DO NOT include the value of Food Stamps, WIC or other supplemental food program benefits. For families with income from farming, use 1/12<sup>th</sup> of last year's income after expenses.*

6. **Lesson Type** Indicate the lesson type where the participant receives the majority of their lessons.  
**Do not select "Both".**

Group Enrollment

A group is defined as 2 or more individuals who meet together for nutrition lessons and operate separately with respect to food purchasing and preparation decisions. Participants will be enrolled as group participants when they live together and meet the above criteria or if they live in separate households but meet together for nutrition lessons.

Individual Enrollment

When two members live in the same household and share resources, only enroll one of them as an individual participant. The other household member may participate in the nutrition lessons, and may be enrolled as a "guest".

7. **Children** Enter the ages of the children separated by commas. Use "0" for infants. Repeat the age for twins or other multiples.
8. **Other Adults** Enter number of other adults, age 20 and older living in household. Do not count participant.

9. **Subgroup** Indicate Subgroup. Guest participants are those who do not qualify for enrollment, but participate in CNEP **group** lessons. Guest participants should not mark EFNEP or ONE.

*Enrollment Requirements:*

**EFNEP:** Participants must be either pregnant or have children, age 19 or younger, living in the home AND be enrolled in one or more food assistance programs.

**ONE Program:** Refer to current program year waivers found on CNEP website.

10. **Gleaning** Indicate participation in gleaning. This applies to fruit and vegetable gleaning efforts only. Guest participants may indicate enrollment in gleaning.
11. **Group Name** Enter name of group if participant is enrolled under group enrollment. **Unit Secretaries: Units should establish subgroups for each group. Group name may also be entered in comment section.**
12. **Ethnicity** Is participant Hispanic, Latino, or Spanish?
13. **Race** Indicate all races that participant self-identifies.
14. **Public Assistance** Check all public assistance programs in which the participant is enrolled at time of entry. "Other" is specified as public assistance that requires low-income as eligibility. It may include: low income housing, Medicaid, or Sooner Care. DO NOT INCLUDE GLEANING.

15. **Number of Lessons** Enter total number of lessons\*\* participant has received at time of enrollment.
- Number of Contacts** Enter total number of contacts\*\* NEA has had with participant at time of enrollment.

**\*\*Refer to “Lesson and Contact Definition” document on CNEP website.**

16. **Enrollment Date** Enter date of enrollment.
- Comment Section** Limited comments (approx. 20 words) may be entered into the participant’s record. NEAs may use this space to indicate prior enrollment, food allergies, children’s names, etc.

<b>CNEP Adult Exit Form (FS-A101)</b>
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All CNEP adult participants must have a CNEP Adult Exit Form when exiting from the nutrition education program for any reason. All CNEP participants who have exited from the program due to “educational objectives met” (graduated) must ALSO have an exit 24-Hour Food Recall and exit CNEP Survey.

1. **Participant Demographics:**
- Name** Enter participant’s first and last name.
2. **Exit Reason** Indicate exit reason which applies
3. **Exit Date** Enter date of exit
4. **Public Assistance** Check all public assistance programs the participant is receiving as a result of a referral or suggestion by NEA. “Other” is specified as public assistance that requires low-income as eligibility. It may include: low income housing, Medicaid, or Sooner Care. **DO NOT INCLUDE GLEANING.**

5. **Maternal Information**  
**Pregnant** Indicate if participant became pregnant after enrollment.
- Breastfeeding** Indicate if participant began breastfeeding after enrollment. **Unit Secretaries: Change participant's pregnancy and/or breastfeeding status if either occurs after enrollment.**
6. **Use of CNEP Information** Process participant's comments as instructed by Area Coordinator.
7. **Number of Lessons** Enter total number of lessons participant has received at time of exit.
- Number of Contacts** Enter total number of contacts NEA has had with participant at time of exit.