

**Santa Clara County SELPA's I, II, III, IV, VII
CASEMIS POSTSECONDARY FOLLOW-UP**

Name (from CASEMIS): _____

Address (from CASEMIS): _____

CASIS ID# (from CASEMIS): _____

The State of California requires that we follow up on you one year after graduating or leaving public school. Please respond to the following questions, and return this form in the enclosed envelope.

Thanks!

1. Are you participating in a postsecondary program? If yes, check all that apply:

- None
- Four-year college/university
- Community college
- Vocational or technical school (two year degree program)
- GED program
- Vocational or technical school (Certificated program)
- Regional Occupational programs (ROP) Classes
- Work Force Investment Act (WIA) supported program
- Non-WorkAbility Employment Program
- Adult Training Program
- Military Training
- Incarcerated

2. Are you currently employed? (unsubsidized)

- Yes No Not applicable

**PLEASE RETURN THIS FORM TO THE ATTENTION OF THE SPECIAL
EDUCATION DIRECTOR OF _____ SCHOOL DISTRICT.**