

Registration date ___/___/___

Term. Date ___/___/___

Reason: _____

Status: _____

Name: _____

Country of Origin _____

Address: _____

Primary Language _____

City: _____ Zip Code _____

Native Ability Speak/Read/Write Speak only

Home phone: _____

Years in the U.S.A. _____ U.S. Citizen Y / N

Cell Phone: _____

Date of birth: _____

Email address: _____

Emergency/ alternate contact: _____
Name relationship phone #

Male / Female

Employment:

Employer Name: _____

Employer phone: _____

Looking for work? _____

Retired: _____ Student: _____

Education completed:

Highest grade completed _____ H.S. diploma _____

College _____

Specialized training: _____

School: _____

Student Availability

	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
morn	_____	_____	_____	_____	_____	_____	_____
noon	_____	_____	_____	_____	_____	_____	_____
afternoon	_____	_____	_____	_____	_____	_____	_____
evening	_____	_____	_____	_____	_____	_____	_____
Anytime	_____	_____	_____	_____	_____	_____	_____

Tutoring Location

Transportation Mode

Drive _____ Bus _____

Other _____

GOAL(s)

___ Improve Reading & Writing Skills

___ Obtain GED or HS Diploma

___ Driver's License

___ Improve Conversation Skills/Vocabulary

___ Obtain Job/Better Job

___ US Citizenship

___ Survival/Life skills

___ Leave Public Assistance

___ Other (please describe)

Comments:

*I give permission for Literacy Volunteers to share the above information with my tutors.

*Signature _____

*Date