



# ADULT TUTORING REGISTRATION FORM

Date: \_\_\_\_\_

Intake: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Female/Male (circle one)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_ Emergency Contact Name/Phone: \_\_\_\_\_

(Preferred contact method: home/cell/work/email (circle one))

Referred by: \_\_\_\_\_ Phone # \_\_\_\_\_

Education Level: _____ High School Diploma Y/N Obtained GED: Y/N Still in high school? Y/N	Ethnicity: _____ Native Country: _____ Language (s): _____	Occupation: _____ Employed/Unemployed Hours: _____
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I agree that a copy of this form be given to my tutor:

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

Goals: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

<p>Days/Time available:</p> <table border="1"> <thead> <tr> <th></th> <th>M</th> <th>T</th> <th>W</th> <th>TH</th> <th>Fri</th> <th>SS</th> </tr> </thead> <tbody> <tr> <td>morning</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>afternoon</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>evening</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>Coordinator: _____ Tutor: _____ Phone: _____ Started: _____ Level: I II III Learner referred: _____ Unable to Contact: _____ Ended: _____ Reason: _____</p> <p>Level upon leaving: I II III</p>		M	T	W	TH	Fri	SS	morning							afternoon							evening							<p>Learning upon entry into the program is: (Circle those that apply)</p> <ol style="list-style-type: none"> <li>1. Disabled</li> <li>2. From a rural area</li> <li>3. From an urban area</li> <li>4. An immigrant</li> <li>5. Homeless</li> <li>6. In a correctional facility</li> <li>7. Is institutionalized</li> <li>8. Employed</li> <li>9. Unemployed</li> <li>10. Is on public assistance</li> <li>11. Is receiving tutorial services</li> </ol> <div style="border: 1px solid black; padding: 5px;"> <p>All forms to coordinators. After contact: 1<sup>st</sup> Copy-Coordinator 2<sup>nd</sup> copy: OLI 3<sup>rd</sup> Copy: Tutor</p> </div>
	M	T	W	TH	Fri	SS																							
morning																													
afternoon																													
evening																													

