

Adult Literacy Program Learner Application

Contact information:

Date: _____

Name: _____

Address: _____

Telephone: _____

Date of birth: _____

The best way to contact me is by:

- email
 home phone
 work phone
 other (specify):

When can you come?

<p>CAPTAIN WILLIAM SPRY 10 Kidston Road 490-5715 Tuesdays <input type="checkbox"/> 1pm-3pm <input type="checkbox"/> 5:30-8:30pm Thursdays <input type="checkbox"/> 9:30-11:30am <input type="checkbox"/> 1pm-3pm</p>	<p>HALIFAX NORTH 2285 Gottingen 490-5779 Wednesdays <input type="checkbox"/> 12pm - 3pm <input type="checkbox"/> 6pm - 9pm Fridays <input type="checkbox"/> 10am - 1pm</p>	<p>KESHEN GOODMAN 330 Lacewood Dr 490-6408 Thursdays <input type="checkbox"/> 12 pm - 3 pm <input type="checkbox"/> 5:30 - 8:30 pm Fridays <input type="checkbox"/> 12 pm - 3 pm</p>	<p>SPRING GARDEN 5381 Spring Gdn 490-5990 Thursdays <input type="checkbox"/> 3 - 6 pm <input type="checkbox"/> 6 - 9 pm Fridays <input type="checkbox"/> 1:30 - 4:30 pm</p>
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Where did you hear about this program?

From a friend or relative
 From a community agency (which one? _____)
 In the Library Guide
 On a poster in the library
 On a poster in the community

In a newspaper
 On the radio
 On the internet
 I have participated previously
 Other: _____

PROGRAM USE ONLY | Matched w/ _____ Notes: _____
Date: _____

Please see other side 

Some things about you:

I want to improve my:

- reading skills
- writing skills
- computer skills
- math skills
- self-confidence
- life skills
- other: _____

What are your long term learning goals?

- become a fluent reader
 - finish high school
 - write the GED test
 - get into another program
 - do training for my job
 - find a job
 - help my children with their homework
- (which one? _____)

Other goals: _____

What is your educational background? _____

What hobbies and interests do you have? _____

Learner Agreement:

During my time as a participant in the Adult Learning Program, I will do my best to attend tutoring sessions regularly and will treat my tutor, Program Coordinator and other learners with respect.

Signed: _____ Date: _____