

Monthly Contact Hours for: _____

Tutor's name: _____

Phone * _____

Student's name: _____

Phone * _____

* Please note any address or phone number changes for you or your learner.

We met _____ hours

Learner homework _____ hours

Tutor prep _____ hours

Learner travel _____ hours

Tutor travel _____ hours

Learner computer _____ hours

Other volunteer hours _____ Please explain _____

Status of Match

_____ Continuing

_____ Discontinuing (If discontinuing explain)

Tutor will take on new or additional learner? ___ Yes ___ No

Materials Read: _____

Writing Done: _____

Special Activities: _____

Goals/ Special Achievements: Please see checklist on back (check all that apply)

Tutor Comments: (Any progress noted? Problems/ Concerns?)

Would you like any assistance from the LVCC office at this time?

- Improved Basic Literacy Skills Date ___/ ___/ ___
- Improved English Language Skills Date ___/ ___/ ___
- Obtained a Job Date ___/ ___/ ___
- Retained/ Improved Current Job Date ___/ ___/ ___
- Earned GED Certificate/ Earned a Secondary School Diploma Date ___/ ___/ ___
- Entered Post- Secondary Education/ Entered Training Date ___/ ___/ ___
- Obtained Citizenship (Achievable Once) Date ___/ ___/ ___
- Reduced Public Assistance Date ___/ ___/ ___
- Got Involved in Community Activities Date ___/ ___/ ___
- Got Involved in Children's Education Date ___/ ___/ ___
- Got Involved in Children's Literacy Activities Date ___/ ___/ ___
- Obtained Skills Needed to Pass US Citizenship Exam
(Achievable Once) Date ___/ ___/ ___
- Voted or Registered to Vote for the First Time
(Achievable Once) Date ___/ ___/ ___
- Received Driver's License (Achievable Once) Date ___/ ___/ ___
- Had Public Assistance Reduced Date ___/ ___/ ___
- Improved Competency in Government and Law Date ___/ ___/ ___
- Improved Competency in Community Resources Date ___/ ___/ ___
- Improved Competency in Consumer Economics Date ___/ ___/ ___
- Improved Competency in Parenting Date ___/ ___/ ___
- Improved Competency in Health Care Date ___/ ___/ ___
- Learned or Improved Skills in Using Computer Technology Date ___/ ___/ ___
- Met Work-Based Student Goal Date ___/ ___/ ___
- Other Known Outcome (Please Explain) Date ___/ ___/ ___