

**OFFICE USE**

DMACC ID# \_\_\_\_\_

Username \_\_\_\_\_

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English Proficiency (verbal):  
limited proficient

# ADULT LITERACY APPLICATION

## 1. PERSONAL INFORMATION

DATE \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State \_\_\_\_\_ ZIP \_\_\_\_\_

Email Address \_\_\_\_\_

Phone (cell) \_\_\_\_\_ (home) \_\_\_\_\_

Back-up Contact Name \_\_\_\_\_

Relation to You: \_\_\_\_\_ Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

How long have you been in the U.S.? \_\_\_\_\_

GENDER  Male  Female

RACE  Caucasian  Black/African American  Asian

Hispanic / Latino  Native American \_\_\_\_\_ Other

Are you a parent? Yes No Ages of children \_\_\_\_\_

**How did you learn about the Literacy Center?** \_\_\_\_\_

## 2. EDUCATION

Where did you go to school? \_\_\_\_\_

Education Completed \_\_\_\_\_

What is your first language? \_\_\_\_\_

What language is spoken in your home? \_\_\_\_\_

Can you read in your first language? Yes No

Do you speak other languages? Yes No Do you read other languages? Yes No

What are your best days and times to meet? \_\_\_\_\_

\_\_\_\_\_

Tutor preference: \_\_\_\_ male \_\_\_\_ female \_\_\_\_ either

**3. EMPLOYMENT**

Employed: \_\_\_\_ Full-time \_\_\_\_ Part-time \_\_\_\_ Unemployed \_\_\_\_ Retired  
\_\_\_\_ Student \_\_\_\_ Public Assistance \_\_\_\_ SSI \_\_\_\_ Food Stamps \_\_\_\_ Section 8/Housing

Do you have more than one job? Yes No

Where do you work? \_\_\_\_\_

Describe your job title/duties: \_\_\_\_\_

**4. YOUR GOALS**

What you want to accomplish by enrolling in the Literacy Center?

**Employment:**

**Education:**

**Financial:**

**Self and Family:**

What do you enjoy doing? Your hobbies?

What do you do well? What are your strengths? How do you learn best?

Tutor _____
Start Date _____