



Client Intake Form – Confidential
Literacy Volunteers of Camden County
English as a Second Language Program

Please complete in full

- * **Date:** _____
- * **Student First Name:** _____ * **Last Name:** _____
- * **Social Security Number:** _____
- * **Address:** _____
- * **City:** _____ * **State:** _____ * **Zip:** _____
- * **Phone Number:** _____ * **Alternate Phone Number:** _____
- * **Email Address:** _____
- * **Date of Birth:** ____/____/____ * **Age:** _____ * **Gender:** M F
- * **English-Speaking Contact Name/Relationship:** _____
* **Phone Number:** _____
- * **Student Place of Birth:** _____ * **Student Native Language:** _____
- * **Native Language Ability:** Speak Read Write
- * **How long have you been in the United States?** _____
- * **Do you plan to live here permanently?** Yes No (How long do you plan to stay? _____)
- * **To become a student with Literacy Volunteers, you will need an appointment to be tested. Are you able to come to the test during the daytime?** Yes No

*** Availability (please check all times you are available for tutoring)**

Please do not plan to bring children to tutoring sessions.

	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

- * **Teacher Preference:** Male Female Either * **Transportation Mode:** _____
- * **Location Preference:** Cherry Hill Voorhees Other _____
- * **Special Needs:** Hearing Impaired Physically Disabled Wheelchair Other _____
- * **Which library is closest to you?** Cherry Hill Voorhees Don't know
- * **Source of referral:** Library Friend/Family Unemployment Agency Other _____

→ There is a second page. Please turn over. →

- * **Ethnicity (choose one):** Hispanic/Latino Not Hispanic/Latino
- * **Race (choose one or more):** American Indian or Alaskan Native Native Hawaiian or Pacific Islander
 Black or African American Asian White
- * **Status on Entry (check all that apply):** Employed Full Time Employed Part Time Unemployed
 Not Looking for Work Retired Public Assistance Homeless Low Income
 Single Parent/Guardian U.S. Citizen F1 Student Visa Disabled Learning Disability
- * **Current job:** _____ * **Job in home country:** _____
- * **Approximate Current Individual Income:** _____
- * **Education Level:** Less than high school (last grade completed: _____) High school graduate
 Some college/technical school Bachelor degree Graduate degree Unknown
- * **Education Location:** Attended school in the U.S. Attended school outside the U.S.
- * **What are your goals? Check all that apply:** Get a job Get a better job Retain a job
 Obtain a high school diploma Enter college Enter job training Obtain citizenship
 Increase involvement in your community Increase involvement in your child's education
- * **Did you study English in your country:** Yes: _____ years No
- * **Can you read English?** Yes No A little * **Can you write in English?** Yes No A little
- * **How much spoken English do you understand?** A lot Some A little None
- * **Where do you hear people speaking English now?** Work TV Radio Other _____
- * **Where do you speak English now?** Work Home Other _____
- * **What do you do to improve your English?** Study Watch TV/movies/listen to radio in English
 Listen to people at work Other _____
- * **Do you use the Internet?** Yes No * **Do you have a computer?** Yes No
- * **Why do you want to learn English? What do you want to use English for?** _____

Student's signature: _____ Date: _____

**Return to: Literacy Volunteers of Camden County
Camden County Library
203 Laurel Road
Voorhees, NJ 08043**

Office Use Only

- | | | |
|---|--------------------------------------|---|
| <input type="checkbox"/> Shared DB _____ | <input type="checkbox"/> GM DB _____ | <input type="checkbox"/> Referred to: _____ |
| <input type="checkbox"/> Tutor: _____ | Notes: _____ | |
| <input type="checkbox"/> Rec. tutor | _____ | |
| <input type="checkbox"/> Class: _____ | _____ | |
| <input type="checkbox"/> Rec. class only | _____ | |
| <input type="checkbox"/> No matching class time | | |



Literacy Volunteers of Camden County

A ProLiteracy America Affiliate

Shyamoli De
Director

Mikala Allen
Coordinator of Basic Literacy

Ginny Marcin
Coordinator of English for Speakers of Other Languages

Release of Information Form

I (print name) _____, authorize **Literacy Volunteers of Camden County** to release my educational records, which include my name, social security number, student ID number, address and date of birth, to the New Jersey Department of Labor and Workforce Development, 1 John Fitch Way, Trenton, NJ and to Camden County College, which is our partner with the Department of Labor and Workforce Development, for the administration of our educational programs.

I understand that the use of my records is limited to and in connection with the audit and evaluation of federally supported education programs, or in connection with the enforcement of the federal legal requirements related to the WIA Title II grant program.

My signature is an acknowledgement that I have read and voluntarily consent to the release of the above-mentioned information.

Signature: _____

Date: _____

Social Security Number * _____

*SSN is used for data matching purposes only.

Camden County
Vogelson Library
203 Laurel Road
Voorhees, NJ 08043
(856) 772-1636 Ext. 7331

Camden County
Resource Center
2600 Mt. Ephraim Avenue
Camden, NJ 08104
(856) 968-4267

Email:
literacy@camden.lib.nj.us
Website:
<http://lva.camden.lib.nj.us>