



New Student Registration Form

Student's Full Name: _____ Date: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____ County: _____

Email: _____ Cell Phone: _____

How did you learn about us? _____

Tutoring Needs: _____ Personal Tutor _____ Conversation Class _____ Both

Preference of tutor: _____ Male _____ Female _____ No preference

Please write in the times you are available to meet with a personal tutor:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

Would you like to study for: _____ Driver's license exam _____ English proficiency exam _____ Citizenship exam

The Literacy Council of the Black Hills **cannot** provide transportation to or from tutoring lessons or classes.

Transportation? _____ Own car _____ Someone will drive me _____ Bus/taxi _____ Walk

May the Literacy Council use your image (photo) on our website, Facebook, or printed materials? Please initial if you give permission: _____ **Student Initials**

The following information is needed for our record keeping and funding purposes:

Gender: _____ Male _____ Female Date of Birth: _____ USA Military Veteran? YES / NO

Race (check one):

- White / Caucasian _____
- Native American _____
- Asian _____
- Hispanic / Latino _____
- African American _____
- Multi-Racial _____
- Unknown _____
- Other _____

Level of Education (check one):

- Less than 12th grade _____
- High school diploma/GED _____
- Some college or technical school _____
- Completed a college degree or certificate _____
- Completed a Masters or Doctorate degree _____

Home Country: _____

Primary Language(s): _____

English Level: Beginner / Intermediate / Advanced

Number of children under 18 (living at home): _____

Number of children over 18: _____

Name & Location of Workplace: _____