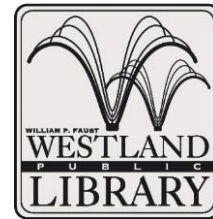


Westland Literacy - Monthly Update



Tutor Name: _____

Tutor e-mail/phone: _____ *

Learner Name: _____ Month/Year: _____

Please check the accomplishment(s) you achieved this month. Also fill out the hours section on the back of this form. Your comments and observations are encouraged—Thank You!

Personal Accomplishments	Accomplishments <ul style="list-style-type: none"> <input type="checkbox"/> Improved confidence <input type="checkbox"/> Improved life skills <input type="checkbox"/> Played a game <input type="checkbox"/> Worked on a computer <input type="checkbox"/> Other: _____ 	Employment Accomplishments	Accomplishments <ul style="list-style-type: none"> <input type="checkbox"/> Filled out a job application <input type="checkbox"/> Completed a resume <input type="checkbox"/> Performed job better <input type="checkbox"/> Gained employment <input type="checkbox"/> Retained or advanced in current job <input type="checkbox"/> Other: _____
Reading Accomplishments	<ul style="list-style-type: none"> <input type="checkbox"/> Read mail <input type="checkbox"/> Read newspaper <input type="checkbox"/> Read stories/articles <input type="checkbox"/> Read book <input type="checkbox"/> Read for pleasure <input type="checkbox"/> Read other: _____ 	Educational Accomplishments	<ul style="list-style-type: none"> <input type="checkbox"/> Joined another academic program <input type="checkbox"/> Studied for a government test <input type="checkbox"/> Improved spelling <input type="checkbox"/> Learned more sight words <input type="checkbox"/> Other: _____
Writing Accomplishments	<ul style="list-style-type: none"> <input type="checkbox"/> Wrote a letter or postcard <input type="checkbox"/> Wrote name, address, and telephone number <input type="checkbox"/> Completed forms or applications <input type="checkbox"/> Wrote more at home, work, or school <input type="checkbox"/> Wrote a story or essay <input type="checkbox"/> Took phone messages <input type="checkbox"/> Wrote other: _____ 	Economic Accomplishment	<ul style="list-style-type: none"> <input type="checkbox"/> Opened a bank account <input type="checkbox"/> Read a bank statement <input type="checkbox"/> Used the ATM machine <input type="checkbox"/> Wrote checks <input type="checkbox"/> Other: _____
Speaking/Listening Accomplishments	<ul style="list-style-type: none"> <input type="checkbox"/> Improved speaking skills <input type="checkbox"/> Improved pronunciation <input type="checkbox"/> Understood spoken English better <input type="checkbox"/> Used the telephone <input type="checkbox"/> Spoke to a new person <input type="checkbox"/> Expanded vocabulary <input type="checkbox"/> Other: _____ 	Family Accomplishments	<ul style="list-style-type: none"> <input type="checkbox"/> Read more to children/grandchildren <input type="checkbox"/> Became involved in children's school <input type="checkbox"/> Helped children with homework <input type="checkbox"/> Worked on family health issues <input type="checkbox"/> Other: _____
		Community Accomplishments	<ul style="list-style-type: none"> <input type="checkbox"/> Used the library <input type="checkbox"/> Volunteered <input type="checkbox"/> Went shopping alone <input type="checkbox"/> Read street, traffic or other signs <input type="checkbox"/> Other: _____

*please let us know if you or your learner have a new address, phone number, or e-mail address.

Is there anything else you'd like to share with us about your goals, accomplishments, triumphs, or needs?

Please list any favorite activities you are using in your lessons:

May we share your ideas in training and the newsletter? YES NO

Thank you for filling this out! Your updates will help us improve our programs, seek grants, recognize achievements, and help more learners.

Date We Met	Place(s) We Met	Hours Together	Learner Prep Hours	Tutor Prep Hours
Totals:				