



LEARNING ENGLISH AS A SECOND LANGUAGE
AT THE J.V. FLETCHER LIBRARY

Student Intake:

First Name _____ Last Name _____

Date _____
(month/day/year)

Email _____ Telephone _____

Address _____

When can you meet with your tutor? Start date? _____

days _____

evenings _____

weekends _____

Do you have use of a car? or Other Transportation?

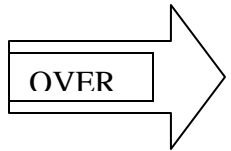
Country of origin _____

First language _____

How long have you been in the U.S.? _____

How long will you stay? _____

Highest Level of Schooling? _____





Have you studied English before?

no _____

yes _____

when/where:

Prefer:

1 on 1 tutor _____

small class _____

conversation group _____

What are your goals in studying English?

Comments: _____



FOR STAFF USE ONLY

Placed with: _____

Date: _____ Telephone: _____

Email : _____

