



# Literacy Volunteers-Englewood Library

(201) 568-2215 x 236

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## Student Registration

### Contact Information

Date \_\_\_\_\_

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Home / Cell Phone \_\_\_\_\_

Do you work?    Yes \_\_\_\_\_ No \_\_\_\_\_                      Part Time \_\_\_\_\_ Full Time \_\_\_\_\_

What do you want help with? Reading \_\_\_\_\_ English Language \_\_\_\_\_ Citizenship \_\_\_\_\_

<b>Check the days and times you are available for class:</b>			
<b>Day</b>	<b>Morning (9-1)</b>	<b>Afternoon (1-6)</b>	<b>Evening (6-9)</b>
<b>Monday</b>	_____	_____	_____
<b>Tuesday</b>	_____	_____	_____
<b>Wednesday</b>	_____	_____	_____
<b>Thursday</b>	_____	_____	_____
<b>Friday</b>	_____	_____	_____
<b>Saturday</b>	_____	_____	_____