

Monthly Tutoring Report - One sheet per STUDENT

This form is due on or before the 5th day of each - reporting for the previous month.

Return this form by the 5th of each month to the council office with which you are affiliated:

_____ READ Lakeland, 1628 S. Florida Ave., Lakeland, FL 33803 or by email: readlakeland@aol.com or fax 863.688.0248

_____ NEPLC, 300 E. Bridgers Ave., Auburndale, FL 33823 or by email to nepc@live.com or fax 863.965.5477

_____ Lake Wales Literacy, 140 E. Park Ave., Lake Wales, FL 33863 or by email to lw-literacy@hotmail.com

_____ Ft. Meade Literacy, Gause Riverside Academy, 1002 6th St. NE, Ft. Meade, FL 33841 or by email to lweemsatschool@aol.com

Date Prepared _____

Tutor Name: _____ **Student Name:** _____

Tutoring Location: _____

Program: ___ ESOL ___ ABE ___ Math ___ Pre-GED ___ Other (book club, etc.)

Curriculum & Materials (check the book or books you & your student are currently using & indicate lesson completed)

LWR Skill Book/or title of other book _____
Book# & Lesson#: _____

ESOL - English Book Title: _____
Book# & Lesson#: _____

Challenger _____
Book# & Lesson#: _____

Voyager _____
Book# & Lesson#: _____

Other Materials _____
Please describe: _____

STUDENT DROPPED OUT - Reason: _____

Goals:

Date Goal Set	Goal:	Date Goal Met
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Hours of Volunteer Time

	Date	Tutoring Time (to qrtr hr)	Prep Time	Travel Time
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
TOTAL	<input type="text" value="XXXXX"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>