

Learner Name	Learner Address	Learner Phone Number
Tutor Name	Tutor Address	Tutor Phone Numbers
Codes: (E) Called, (UE) No Call, (TA) Tutor absent, (H) Holiday, (S) Snow day		

Monthly Session #	Date and Time Type Hours (decimal)	Complete the Date and Hours this Learner was Tutored each Week												Total
		(When Learner is absent, indicate "E" for excused absences and "UE" for unexcused absences)												
	Example													
1	Date	8/3/15												
	Instruction	1.5												
	Preparation	0.25												
	Travel	0.5												
2	Date	8/10/15												
	Instruction	E(called)												
	Preparation	0.25												
	Travel	0												
3	Date	8/17/15												
	Instruction	UE(no call)												
	Preparation	0												
	Travel	0.5												
4	Date	8/23/15												
	Instruction	1												
	Preparation	0												
	Travel	0.5												
5	Date	8/31/15												
	Instruction	1.5												
	Preparation	0.25												
	Travel	0.5												
Total hours spent with this Learner for the year:		Instruction hours =	<input style="width: 40px; height: 20px;" type="text"/>	Preparation hours =	<input style="width: 40px; height: 20px;" type="text"/>	Travel hours =	<input style="width: 40px; height: 20px;" type="text"/>							

CASAS test score when learner **began** the program: Reading Math
 CASAS test score at the **end** of the school year: Reading Math
 Took Success course: Yes No
 Took GED ready practice test Yes No
 Math score: Reading score:
 Vocabulary score Book assigned

How many times per week do you meet your learner?
 Day: Time: Tutoring site

Mark any GOALS this Learner met during the school year:

<input type="checkbox"/>	Advanced to a higher book	<input type="checkbox"/>	Obtained a driver's license
<input type="checkbox"/>	Entered employment	<input type="checkbox"/>	Came to class regularly and on time
<input type="checkbox"/>	Retained employment	<input type="checkbox"/>	Registered to vote and/or voted for first time
<input type="checkbox"/>	Received GED or other secondary school diploma	<input type="checkbox"/>	Increased involvement in community activities
<input type="checkbox"/>	Entered other education and/or training	<input type="checkbox"/>	Increased involvement in children's educational activities
<input type="checkbox"/>	Reduced receipt of public assistance	<input type="checkbox"/>	Other: <input type="text"/>
<input type="checkbox"/>	Worked on computer each week for one hour in each subj.	<input type="checkbox"/>	Other: <input type="text"/>

Check any Math goals met this year

Working with Numbers Math Sense Operations Math Sense problem solving Math Sense Analysis
 If the Math book was not completed please indicate were you left off: Text book: Last page completed:

Check any Vocabulary levels met this year:

Vocabulary Basics Groundwork for Better Vocabulary Build Vocabulary Skills Advanced Vocabulary Skills
 If the Vocabulary book was not completed please indicate were you left off: Text book: Last page completed:

Check any Reading levels met this year:

Laubach 1 2 3 4
 Challenger 1 2 3 4 5 6 7 8
 GED Reading Essentials GED Writing Essentials Common Core Reading Common Core Writing
 If the Reading book was not completed please indicate were you left off: Text book: Last page completed:

Comments:

When your Learner LEAVES the program, please complete the following & submit this form to the DLC immediately.

Date Learner left: Why did this Learner leave?

Would you like to teach another Learner?
 Yes: No:

If yes - when, where, what and how many Learners would you like to teach?