

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	
•	Start date?
daysevenings	
weekends	
Gender: MaleFemale(p	lease check one)
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?	



ave you studied English before?	
no	_
yes	_
when/where:	
efer:	
1 on 1 tutor	
small class	
conversation group	
hat are your goals in studying En	alish?
-	
	
omments:	
<+>+<+	>
	FOR STAFF USE ONLY
Placed with:	
Date:	Telephone:
Email :	