

**THE FAMILY RESOURCE CENTER OF SHEBOYGAN COUNTY  
LITERACY COUNCIL PROJECT**

PLYMOUTH  
1500 Douglas Drive Suite B • Plymouth, WI 53073  
(920)892-6706 • Fax: (920)893-4403



SHEBOYGAN  
2508 South 8<sup>th</sup> Street • Sheboygan, WI 53081  
(920)457-1888 • Fax: (920)457-4690

E-mail: frcliteracy@excel.net

**INTAKE FORM - STUDENT — Confidential**

*The information on this form is used for local program development and for reporting to our funding sources.  
Information will be kept confidential. No identifying information will be shared. Thank you.*

DATE \_\_\_\_\_

Name (first, middle, last) \_\_\_\_\_  Male  Female  
 Address \_\_\_\_\_ (City) \_\_\_\_\_ (Zip Code) \_\_\_\_\_  
 Home Telephone \_\_\_\_\_ Work or Cell Telephone \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_ E-mail \_\_\_\_\_  
 Native Language \_\_\_\_\_ Country of origin \_\_\_\_\_ Other languages \_\_\_\_\_  
 Emergency contact person \_\_\_\_\_ Emergency contact person's Phone \_\_\_\_\_  
 What is your relationship to contact person? \_\_\_\_\_

**AUTHORIZATION**

I understand that a criminal background check will be performed by the Literacy Council Project of Family the Resource Center of Sheboygan County, before I am enrolled as a student. I authorize any institution, information agency or law enforcement agency to furnish any and all related information. Any information received as a result of a background check is kept strictly confidential.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**ETHNIC GROUP**

*Please check one.*

- Latino (Hispanic)  
 Asian/Pacific Islander  
 African American/Black  
 American Indian/Alaskan Native  
 Caucasian  
 Multiracial \_\_\_\_\_

**EDUCATION**

*Check highest level attained.*

- Grade 0-4  
 Grade 5-8  
 Grade 9-11  
 High School Diploma  
 GED  
 Trade or Technical School  
 Other  
 Some College

**OCCUPATION**

*Please check one.*

- Clerical  
 Food  
 Manufacturing  
 Technical  
 Service  
 Sales  
 Health  
 Homemaker  
 Unemployed  
 Student  
 Other \_\_\_\_\_

**SOURCE OF REFERRAL**

*Check all that apply*

- TV/ Radio  
 Newspaper  
 Friend or Relative  
 Employer  
 Library  
 Another Student  
 Flyer/Brochure/Catalog  
 Website  
 Other \_\_\_\_\_

**AGE**

*Please check one.*

- 13 – 16  17 – 19  20 – 29  
 30 – 39  40 – 49  50 – 64  
 65 & over

**Are you employed?**

- Full Time  Part Time

**WHEN ARE YOU AVAILABLE TO MEET WITH A TUTOR?**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Monday Morning    | <input type="checkbox"/> Monday Afternoon    | <input type="checkbox"/> Monday Evening    |
| <input type="checkbox"/> Tuesday Morning   | <input type="checkbox"/> Tuesday Afternoon   | <input type="checkbox"/> Tuesday Evening   |
| <input type="checkbox"/> Wednesday Morning | <input type="checkbox"/> Wednesday Afternoon | <input type="checkbox"/> Wednesday Evening |
| <input type="checkbox"/> Thursday Morning  | <input type="checkbox"/> Thursday Afternoon  | <input type="checkbox"/> Thursday Evening  |
| <input type="checkbox"/> Friday Morning    | <input type="checkbox"/> Friday Afternoon    | <input type="checkbox"/> Friday Evening    |
| <input type="checkbox"/> Saturday Morning  | <input type="checkbox"/> Saturday Afternoon  | <input type="checkbox"/> Saturday Evening  |
| <input type="checkbox"/> Sunday Morning    | <input type="checkbox"/> Sunday Afternoon    | <input type="checkbox"/> Sunday Evening    |

**Special Needs:**  Physical  Visual  Hearing  Other

**TUTOR PREFERENCE**  Male  Female  Either

**Do you have transportation?**  Yes  No

**Need financial assistance to pay for materials?**  Yes  No

**Total annual household income for your family (check only one):**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> \$0-\$5,000     | <input type="checkbox"/> \$5,001-\$10,000 | <input type="checkbox"/> \$10,001-15,000 |
| <input type="checkbox"/> \$15,001-20,000 | <input type="checkbox"/> \$20,001-25,000  | <input type="checkbox"/> \$25,001-30,000 |
| <input type="checkbox"/> \$30,001-35,000 | <input type="checkbox"/> \$35,001-40,000  | <input type="checkbox"/> \$40,001-45,000 |
| <input type="checkbox"/> \$45,001-50,000 | <input type="checkbox"/> Over \$50,001    |  |

**Please mail, email or drop off your completed form to the Sheboygan or Plymouth Family Resource Center address at the top of this form. Someone from the Literacy Council Project will call you.**