



Montcalm Area Reading Council

Montcalm Area Reading Council

200 W Judd Street | Greenville, MI 48838

www.montcalmareareadingcouncil.com

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Learner Registration Form

Name: _____ Male ___ Female ___

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____ Secondary Phone: _____

Email: _____ Date of Birth: _____

Ethnicity	Education	Employment
<input type="checkbox"/> African American <input type="checkbox"/> American Indian/ Alaskan <input type="checkbox"/> Asian <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic/ Latino <input type="checkbox"/> Other	<input type="checkbox"/> Less than 12 th Grade <i>Last Grade Attended:</i> _____ <input type="checkbox"/> High School/ GED <input type="checkbox"/> Some College <input type="checkbox"/> College Degree <input type="checkbox"/> Unknown	<input type="checkbox"/> Employed <i>Employer:</i> _____ <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Not Looking <input type="checkbox"/> Other

When can you meet with a tutor? (Check all that apply):

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

What is your primary goal?

Improve Literacy Skills Improve English Skills *What is your primary language?* _____

Do you have a tutor preference? (Check all that apply):

Male Female No Preference

Do you have transportation?

Yes No

How did you hear about MARC?

School Agency Employer Family/ Friend Library Newspaper

Special Event Poster/ Brochure Website/ Social Media Other:

Signature: _____ Date: _____

(Office Use Only) **Student #:** _____