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## English Language Learner Application Form

Name: \_\_\_\_\_ Today's Date: (mm/dd/year) \_\_\_\_ | \_\_\_\_ | \_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Complete Mailing Address (if different from above): \_\_\_\_\_

Gender:    Male    Female    Do not identify                      Date of Birth (mm/dd/year) \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Preferred Contact:    Home    Cell    Work    Email

Email: \_\_\_\_\_

In case of emergency, please contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Ethnic Group:** \_\_\_\_\_ **Emergency Contact Phone:** \_\_\_\_\_

- |                                |                                |                    |       |
|--------------------------------|--------------------------------|--------------------|-------|
| American Indian/Alaskan Native | Native Hawaiian/Pacific Island | Hispanic/Latino(a) | Other |
| Asian                          | Black/African American         | White              |       |

**Region of Origin:**

- |             |                |                       |
|-------------|----------------|-----------------------|
| Asia        | Eastern Europe | Puerto Rico           |
| Africa      | Western Europe | Central/South America |
| Middle East | Mexico         | Other                 |

**Native Language:** \_\_\_\_\_ **Country of Origin:** \_\_\_\_\_

**Education:** Highest Grade Completed: \_\_\_\_\_

- |  |                      |                 |
|--|----------------------|-----------------|
| Less than 12th Grade; last year: _____ | Some College         | Graduate Degree |
| High School Diploma/GED                | Undergraduate Degree | Not Available   |

**Employment Status** (check one):

- Employed                      Unemployed/Looking                      Not in Labor Force (Retired, student, disabled, etc.)

If you are employed, occupation: \_\_\_\_\_

Place of employment: \_\_\_\_\_

**Child or Children** (check all that apply):

|           |      |        |            |
|-----------|------|--------|------------|
| None      |      |        |            |
| Child #1: | Male | Female | Age: _____ |
| Child #2: | Male | Female | Age: _____ |
| Child #3: | Male | Female | Age: _____ |
| Child #4: | Male | Female | Age: _____ |

|   | Yes | No |
|---|-----|----|
| Do you have a formally diagnosed learning disability? |     |    |
| Do you have any other disability?                     |     |    |

# English Language Learner Application Form

|  |     |    |                |
|--|-----|----|----------------|
|  | Yes | No | I am a citizen |
| Are you interested in becoming a U.S. citizen? |     |    |                |

**Have you voted in U.S. local, state, or national elections?**

Yes      No      Sometimes      Does not apply

**How did you find out about Literacy Volunteers of Bangor?** (check all that apply):

|                          |                  |                      |              |
|--------------------------|------------------|----------------------|--------------|
| TV/Radio/BusAd           | Employer         | Special Event        | Social Media |
| Poster/Pamphlet/Brochure | Other Student    | Other agency         | Other:       |
| Family /Friend           | Newspaper        | College              |              |
| Library                  | Website/Internet | Healthcare provider: |              |

**Who told you about Literacy Volunteers?**

|  |        |    |
|--|--------|----|
| Name:  | Phone: |    |
| Have you ever worked with a Literacy Volunteer?<br>If so, where? | Yes    | No |
|  | When?  |    |
| Have you ever attended Adult Ed?<br>If so, where?                | Yes    | No |
|  | When?  |    |

**When can you meet with a tutor** (check all that apply):

|           |        |        |         |           |          |        |          |
|-----------|--------|--------|---------|-----------|----------|--------|----------|
|           | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| Morning   |        |        |         |           |          |        |          |
| Afternoon |        |        |         |           |          |        |          |
| Evening   |        |        |         |           |          |        |          |

|   |     |    |
|---|-----|----|
| Do you have transportation?   | Yes | No |
| What public place(s) would be best for you to meet with your tutor? |     |    |

**If you were to be matched with a tutor, what would be your preference?** (check all that apply)?

Male      Female      Younger      Older      No Preference

**What are your Interests/Hobbies?**

**I agree that all the above information is true to the best of my knowledge.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*You may use either an electronic signature or simply type your name in the space provided.*

Interviewer Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*You may use either an electronic signature or simply type your name in the space provided.*

*In complying with the letter and spirit of applicable laws, LV-Bangor accepts volunteers, employees, and students without discrimination on the basis of a person's race, religion, color, age, gender, national origin, citizenship, physical or mental disabilities, political beliefs, marital or family status, sexual orientation, veteran status, or other classification protected by law.*

*English Language Learner Application—Initial Goals and Outcomes*

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Why did you contact us?

What would you like help with? (Check all that apply:

Learn better English

    speak English and have  
    conversations with others

    understand English

    help with accent

    understand American culture /  
    customs / my community

    obtain U.S. Citizenship

Reading

    for general information

    for health information

    for work reasons

    for pleasure

    join a book club

    to children

    helping children in and with school

Spelling

Writing

Math

Get a job / get a better job

Get a driver's license

Get diploma or certificate

Get into training or further education

Improve self-confidence

What do you want to learn? What do you want to be able to do?

How will you know that you have made progress?