



Literacy Central Vancouver Island ESL Learner Intake Form

Application Date: _____
Start Date: _____

If you need help, just ask!

First Name: _____ Last Name: _____

English Name (if applicable): _____



ADDRESS

Street: _____

City: _____ Postal Code: _____



CONTACT DETAILS

Phone: _____ Cell: _____

Email: _____



PERSONAL

Date of Birth: _____ Country of Origin: _____

First Language: _____ Reading: Yes No Writing: Yes No

Second Language: _____ Reading: Yes No Writing: Yes No

ENGLISH LEVEL None Beginner Advanced Fluent **Tested ESL Level** _____

Previous English Classes? Yes No

Can you read: A Menu An Application Form A Newspaper A Book



CHILDREN INFORMATION

1. _____ Birth date: _____ Age: _____

2. _____ Birth date: _____ Age: _____

3. _____ Birth date: _____ Age: _____

Do you want your children to have an ESL one-to-one tutor? Yes No





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LEARNING GOALS

Services Interested In: One-to-One Tutoring Group Classes Social Events
 In Person (LCVI) Online

Learning Goals: _____



AVAILABILITY

Is there anything that could interfere with your ability to meet with your tutor? Yes No

If yes, please explain: _____

What days work best for you to meet?

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

What time of day works best to meet?

Morning (9am - 12pm) Afternoon (1pm - 4pm) Evening (5pm - 8pm)

**This information is collected to help us run better programs and obtain funding.
NO personal information will be shared outside LCVI.**

Age Group:

Gender: (optional)

Pronoun(s):

Status in Canada:

Employment Status:

Career: _____

Education Level:

Do you Identify as Indigenous?

Yes

No

How did you hear about us?

I agree to be registered in your database and placed on your waitlist or in a learning program. When registered I agree to share my contact information with my Volunteer Tutor or Program Leader:

Signature

Date





Literacy Central Vancouver Island

ESL Learner Intake Form

Sharing of Assessment Information With Tutor

Literacy Central Vancouver Island (LCVI) provides literacy, ESL and numeracy assessments for our learners. The assessments completed by learners **are not used for diagnosis**. The assessments provide LCVI with a general knowledge of the learner's English language ability and level. This information is then used to pair LCVI learners with a tutor they feel will best meet the needs of the learner(s). A copy of the assessment results would also be provided to the tutor for the purpose of planning and preparation; setting short and long term goals for the learner(s).

I _____ understand that Literacy Central Vancouver Island will be conducting an assessment with _____ (learner name). I understand that a copy of the assessment results will be used for pairing the learner(s) with a tutor.

I **consent** to Literacy Central Vancouver Island sharing a copy of the assessment results with the tutor for the purpose of planning and preparation; setting short and long term goals for the learner(s).

I **do not consent** to Literacy Central Vancouver Island sharing a copy of the assessment results with the tutor.

Signature

Date



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ESL Learner Agreement

By enrolling in the ESL one-to-one Tutoring Program, I agree to the following:

- I will come to my tutoring sessions as scheduled and on time.
- If I cannot attend, I will call my tutor ahead of time (the day before, if possible).
- If I am unhappy with my tutor or my lessons, I will let the Tutor Coordinator know so that other arrangements can be made (call 250.754.8988).
- If I decide to stop tutoring, I will let both my tutor and the Tutor Coordinator know as soon as possible (call 250.754.8988).

Signature

Date





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Needs Assessment

Please indicate 3-5 conversational area(s) you would like immediate help with:



School



Work



Dirction



Banking



Shopping



Cooking



Transportation



Emergency



Talking to a doctor



Reading Contracts



Restaurants and
other establishments



General conversation



Landlord/Tenant



Employment and the
law



Police



Immigration
and citizenship

Other: _____