



# Literacy Solutions NY, Inc.

P.O. Box 693  
Yonkers, NY 10702  
914-375-7964

Name: \_\_\_\_\_ Name for \_\_\_\_\_ Tel (H): \_\_\_\_\_  
Nametag \_\_\_\_\_

Address: \_\_\_\_\_ Tel (W): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Sex: M \_\_\_ F \_\_\_ Do you drive? \_\_\_\_\_

e-mail: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### Ethnicity

Native Amer. \_\_\_\_\_  
Asian \_\_\_\_\_  
Black \_\_\_\_\_  
White \_\_\_\_\_  
Hispanic \_\_\_\_\_

### Education

HS Dip \_\_\_\_\_  
2 Yrs College \_\_\_\_\_  
Undergrad Degree \_\_\_\_\_  
Graduate Deg \_\_\_\_\_

### Reference

TV \_\_\_\_\_  
Radio \_\_\_\_\_  
Friend \_\_\_\_\_  
Employer \_\_\_\_\_  
Newspaper \_\_\_\_\_  
Library \_\_\_\_\_  
Family \_\_\_\_\_  
Other \_\_\_\_\_

### Employment Status

Full-time \_\_\_\_\_  
Part-time \_\_\_\_\_  
Unemployed \_\_\_\_\_  
Retired \_\_\_\_\_  
Not in the \_\_\_\_\_  
labor mkt \_\_\_\_\_  
Other \_\_\_\_\_

### Occupation

Professional \_\_\_\_\_  
Managerial \_\_\_\_\_  
Clerical \_\_\_\_\_  
Technical \_\_\_\_\_  
Service \_\_\_\_\_  
Sales \_\_\_\_\_  
Homemaker \_\_\_\_\_

Profession/Occupation \_\_\_\_\_

Other Volunteer Activities \_\_\_\_\_

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

## TRAINEES ARE REQUIRED TO ATTEND ALL WORKSHOP SESSIONS

✍ Please complete the questionnaire on the back of this sheet ✍

You will be asked at your first workshop session  
to verify that this information is still valid.

NAME \_\_\_\_\_

### Tutor availability and preferences

- In what areas would you be willing to tutor?

(Please indicate your top three choices, putting the library closest to your home or work as your first choice, then libraries where you would be willing to tutor. Keep in mind that the areas of greatest need are Yonkers – Riverfront Library, Mount Vernon, New Rochelle, and White Plains, although some students are also available in other areas.)

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

- What days and times during the week will you be able to tutor?

(Please be as flexible as possible. Students in our program are primarily available on week-ends and in the evenings. Also indicate, wherever possible, the specific times you will be available, e.g. Saturday mornings, 10:30 AM – 2:30 PM.)

| Day of the Week | Morning | Afternoon | Evening |
|-----------------|---------|-----------|---------|
| Monday          |         |           |         |
| Tuesday         |         |           |         |
| Wednesday       |         |           |         |
| Thursday        |         |           |         |
| Friday          |         |           |         |
| Saturday        |         |           |         |
| Sunday          |         |           |         |

- Are there any other factors that may influence your availability?

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- Are there any other criteria you wish us to keep in mind when we look for a student match? (your interests, type of student preferred etc.)

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Thank you for your help!