

Mid-State Literacy Council
2006/2007 Tutor Monthly Report – Pair Form

For the Month of: _____
Meeting Place: _____
Meeting Date / Time: _____
Student's Name: _____
Tutor's Name: _____

Which goal(s) are you working on this month?

What steps / activities did you use to achieve your goals?

What if any materials were used to achieve these goals?

What is your student's preferred learning style? (Check the dominant style)

- Visual (learns best with printed matter, pictures, graphs and charts)
- Auditory (learns best with oral/aural activities, focuses on pitch and rhythm)
- Tactile/Kinesthetic (learns best by doing, touching, and acting)

What techniques / materials did you use to address your student's **learning style**?

Please list all hours in half hour increments (e.g. 2.0 or 2.5):

Total hours of **Instruction** for the month: _____

Total hours of **Preparation** for the month: _____

Total hours of **Travel Time** for the month: _____

Are you satisfied with your students' progress?

List the successes you have had with your student this month:

List any problems you have had:

Any additional comments?

Your reports are important in our reporting process to the Pennsylvania Department of Education. Please complete this form and mail or fax it to the appropriate office.

State College Office

Mid-State Literacy Council
248 Calder Way, Suite 307
State College, PA 16801
Fax: (814) 238-7492

E-Mail: mslc@mid-stateliteracyconcil.org

Clearfield Office

Mid-State Literacy Council
650 Leonard Street
Clearfield, PA 16830
Fax: (814) 768-7370

E-Mail: mslc@clearnet.net