

Mid-State Literacy Council
Monthly Form (Class Teachers)

Month		Year		Centre County:		Clearfield County:	
Teacher(s):							
Class:							

Mark the goals your students reached this month and write their names.

'X' if yes	GOAL	NAME(S)
	WORK	
	Applied to jobs	
	Created a resume	
	Offered more hours at work	
	Hired at new job	
	Earned promotion at work	
	Maintained employment	
	HEALTH	
	Learned how to make doctor's appointments	
	Learned how to use other health services	
	Learned health vocabulary	
	Learned how to access health information (online or through community resources)	
	PERSONAL	
	Earned driver's license	
	Earned US citizenship	
	Passed GED	
	Volunteered at child(ren)'s school	
	Volunteered in community	
	Learned how to fill out applications or forms	
	Learned how to use a calculator	
	Increased computer skills	

Other work goals: _____

Other health goals: _____

Other personal goals: _____

What were your successes this month?: _____

What were your challenges?: _____

Focus areas and materials used: _____

Total Hours of instruction for the month:	
Total Hours of preparation for the month:	

Please return report to: Mid-State Literacy Council
248 E. Calder Way, Suite 307
State College, PA 16801
mslc@mid-stateliteracycouncil.org