**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

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