***Monthly Form***

Please submit within 7 days of your last session of the month

Your name: **Volunteer’s** **name** Date: **Date**

**For tutors**, student name: **Student’s name**

**For class teachers**, class title: **Class Title**

Month reporting on (ex. September 2021): **Month**

Total hours of instruction for the month: **Instructional hours**

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

**Compared to before, my student has improved in…** (*Please check all that apply.)*

|  |  |  |
| --- | --- | --- |
| [ ] **Fluency**  | [ ] **Comprehensibility** | [ ] **Vocabulary** |
| * Speaks fluidly and confidently in English
* Attempts to communicate in English even though mistakes may be made
 | * Follows writing or speaking conventions enough to be understood
* Uses appropriate grammar and words to convey intended meaning
* Adjusts sound and stress patterns when necessary to make speech understandable
 | * Uses new English words and phrases correctly
* Understands the meaning of more English expressions
 |
| [ ] **Conversation** | [ ] **Navigating USA Culture** | [ ] **Self-Advocacy** |
| * Knows a variety of expressions for starting conversation
* Uses skills and strategies to keep conversations going
* Engages in real world conversations in English
 | * Can interact effectively and appropriately in English in relevant settings
* Can accurately interpret the meaning of local expressions and behaviors
 | * Uses strategies to help other people understand what they’re trying to say
* Asks clarifying questions
* Asks for help when needed
 |

1. What student goal(s) did you focus on this month in your tutoring or teaching? **Student goals**
2. Briefly describe the methods and materials you used to address these goals? **Methods and materials**
3. Specifically, how do you feel your student(s) improved this month? What skill(s) did they develop? What do they understand better now? **Improvements**
4. What did you find most challenging in your work as a teacher or tutor this month? **Challenges**
5. Did you teach a Health Literacy lesson this month?

YES [ ]  NO [ ]

If yes, please describe the topic. **Describe Health Literacy topic**

1. Would you like to have a Zoom meeting with our ESL Specialist to discuss any concerns or get additional suggestions for your teaching or tutoring?

YES [ ]  NO [ ]

***Thank you so much for volunteering with Mid-State Literacy Council.***

*Please return your responses to Jennifer Walter*

*jwalter@mid-stateliteracycouncil.org*