ESL IN-HOME PROGRAM OF NORTHERN NEVADA

STUDENT REGISTRATION

Send completed form to: ESL In-Home Program, 1894 E. William St., #4-125, Carson City, NV 89701 or Email: eslinhome@gmail.com

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Please complete all information below:

Registration Date: ____________________

Print Student’s Name: ____________________________________________________________

Street Address: __________________________ City, State, Zip Code:____________________

Telephone Number: __________________ E-mail: __________________________

Ethnicity:    □ Prefer not to say,    □ African, □ Asian, □ Caucasian, □ African American, □ American Indian, □ Hispanic □ European □ Other __________________________

Native Country: _________________________

Marital Status:    □ Single    □ Married    □ Widow/er    Birthday: ______________ Age: __________

□ Male    □ Female    Employed Now:    □ Yes    □ No

Number of Children living at home: ______ Ages: ______________

Education: Last Grade Attended _______ ; In what Country ______________

Did you Receive a Certificate    □ Yes    □ No    If Yes, what degree? ______________________

Current Job or Education: ______________________________ __________________________

Household Monthly Income: □ $0~500 □ $500~1000 □ $1000~2000 □ $2000 or more $___________

Goals:

I want Employment    Yes □    No □
I want GED    Yes □    No □
I want Citizenship Study    Yes □    No □
I want Computer Literacy Class    Yes □    No □
I want English Conversation    Yes □    No □

HOW DID YOU HEAR ABOUT OUR PROGRAM?

____________________________________________________________________________________

For Tutors Only: □ ESL □ Computer □ Eng. Conv. □ Citizen □ GED □ Other __________________

Tutor’s Name __________ Start Date __________ Book Level __________ Days/Time __________ Location __________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

STUDENT TO COMPLETE OTHER SIDE …………………………………………………….>
RULES AND REGULATIONS

I, (print name)______________________
will try to practice English both in class and outside of class. I will study and attend every class. I understand that class attendance is important.

1. No Small children during class.

2. Student must call the teacher in advance of class time if student has to cancel.

3. Student must be at the assigned site on time, otherwise tutor will leave. If this happens twice, and the student did not call to cancel, the student will be dropped from class.

4. Any person who comes late can only sit and listen; he/she cannot participate Tutor’s Option.

5. If any problem arises with you and/or your tutor, you are to immediately call the Director, Florence Phillips, at 775-888-2021.

6. I understand that if I miss two classes that I will be removed from the class and asked to pay for or return any books received, unless due to an emergency.

7. I hereby expressly waive, release and forever discharge the ESL In-Home Program and its agents, from any and all manner of action and causes of action whatsoever (including auto accidents), which I, my administrators or executors can, shall, or may have against the ESL In-Home Program, or its agents, as result of becoming a student with the ESL In-Home Program.

Student’s Signature______________________ Dated________________________

(Rev. 1/2018)