



Adult Literacy Program | High School Equivalency and Adult Basic Literacy (Non-ESL)
Student Application

Date: _____

Student Name: _____ Telephone: _____

Address: _____
(street address)

_____ Email: _____
(city and ZIP code)

If this application is being completed by someone other than the applicant:

Your name: _____

Relationship to the applicant: _____

Contact information: _____

Age: 17 18-24 25-39 40-54 55+ Gender: Male Female

Native country: _____ Native language: _____

If your native language is not English, do you need help learning English? Yes No

If preparing for the HSE, in what language will you take the test? English Spanish

Highest Grade/Education Completed: None 1 2 3 4 5 6 7
8 9 10 11 12 Other _____

Please write the hours in the boxes you are available to meet with your tutor. Please note that the more you are available the easier it will be to find a tutor for you. Libraries are open 9am-9pm Mon-Thurs, 9am-5pm Fri-Sat, and 12pm-5pm Sun, except Castle Pines (closes at 7pm Mon-Thurs).

What days and times are you available to meet with your tutor?

Mon _____ Tues _____ Wed _____ Thurs _____

Fri _____ Sat _____ Sun _____

Please check the location(s) where you are able to meet your tutor: Highlands Ranch
Parker Castle Rock Lone Tree Roxborough Castle Pines remotely/Skype

Tutor preference; check all that apply: Male Female Older Younger Doesn't matter

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What subjects do you wish to concentrate on (check all that apply)? Reading Writing
Math Science Social Studies Basic Computer Literacy

If you are planning to take a test, do you have a target date for completion?
No Yes (date _____) *Plan for at least 3 months studying with your tutor.*

What test are you planning to take? GED TASC HiSET
College Placement Other _____
I am not preparing for a test. I am only working on my literacy skills.

Why do you want to participate in this program? What are your goals for after you complete the program?

How many hours per week do you have to work on homework assignments?

Do you have internet access on a computer or tablet at home? Yes No

Are you able to meet with your tutor for at least one hour per week? If you are not able to keep your appointments, your tutor may be reassigned to a new student. Yes No

Do you have basic computer skills (typing, using a mouse, finding information on the internet)?
Yes No

Do you have any special needs? Yes No *Please describe in as much detail as you can how this impacts your learning. You may attach additional sheets if necessary.*

What are your interests and/or hobbies?

If you have questions or prefer a hard copy you can print and complete by hand, email Tiffany Curtin at tcurtin@dclibraries.org or call 303-688-7646.