

# Reading & Writing Student Monthly Report Solano County Library Adult Literacy Program

Student \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

### To be completed by student:

1. What did you work on this month in reading? (Check all that apply.)

- Forms
- Newspapers/magazines
- Books/Short Stories
- Mail
- Texts/Workbooks/Dictionaries
- Other (ex. paperwork from child's school, maps, etc.) \_\_\_\_\_

2. How much progress do you think you have made in reading this month?  
(Please check)

1      2      3      4      5      6      7      8      9      10  
A little progress.....Some progress.....A lot of progress

3. What did you enjoy the most this month in reading? \_\_\_\_\_  
\_\_\_\_\_

4. What did you work on this month in writing? (Check all that apply)

- Applications
- Journals
- Letters
- Workbooks
- Other (ex. lists, notes, etc.) \_\_\_\_\_

**OVER** → → →

5. How much progress do you think you have made in writing this month?  
(Please check)

1      2      3      4      5      6      7      8      9      10  
A little progress.....Some progress.....A lot of progress

6. What did you enjoy the most this month in writing? \_\_\_\_\_

\_\_\_\_\_

7. What goals did you work on this month? \_\_\_\_\_

\_\_\_\_\_

8. Other accomplishments? \_\_\_\_\_

\_\_\_\_\_

9. What do you want to work on next month? \_\_\_\_\_

\_\_\_\_\_

10. Suggestions for materials, workshops or other ways we can help you?

11. Any changes (address, phone number, new baby, etc.)

12. Please return the completed form to:

SCL Adult Literacy Program

1150 Kentucky Street

Fairfield, CA 94533

or ask your tutor to turn it in to the Literacy Office for you.

Thank you!