Joliet Junior College
Division of Adult and Family Services
Stretch Out And Read Program (SOAR)

Volunteer Inquiry Form

Date: _____

Name: _____

Address: _____

City: _____ Zip: _____

Home number: _____ Work number: _____

E-mail: _____

Additional Demographic information (required for our State Reports)
Sex: M/F
Employment Status: _____Full-time _____Part-time _____ Retired
_____Unemployed _____Student

Current Occupation: _____

How did you hear about this program (please be specific)?_____

_____

_____

Which of the following would you be willing to tutor? (mark any that interest you)

_____Reading _____Math _____English as a Second Language _____Small Group _____In a Classroom

Where is one possible location at which you would like to meet students? (Think of public locations such as libraries or the different Joliet Junior College campuses)

_____

_____

Please mark which days you would prefer to meet for tutor training, then write the times you would like to meet:

_____Tuesday at _____

_____Friday at_____

_____Saturday_____

This project was made possible by a grant awarded by the Illinois State Library (ISL), a division of the Office of the Secretary of State, using funds designated for literacy.