**ESL Registration Form**

**Columbia County Library**

|  |
| --- |
| **Student Information** |

**(Please Print Clearly)**

**1. Name:** ***(Last)*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***(First)*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Street Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt.#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. Telephone #** (Home) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Cell) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Information: Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4. E-mail address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5. Country of birth:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **6. Languages spoken:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**7. Gender:** Male ( ) Female ( ) **8. Marital status:** Married ( ) Single ( )

**9. Is there anything you want us to know about you (such as special talents, serious allergies that might occur in class, profession, hobbies, length of time you will be in our program)?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**10. How long have you been in the United States? How did you learn about our program?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**11. Do you already understand, speak, read, or write in English?**

A. Why do you need to learn more English? Please be specific. Give examples of situations that  are difficult for you in English? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

B. What specific areas of English would you like to improve before you leave this class?  \_\_\_\_\_\_\_\_\_\_\_\_\_\_

C. When people speak English to you, how much do you understand? Check the amount:   everything \_\_\_ most \_\_\_ some \_\_\_ a little \_\_\_ very little  \_\_\_

D. When you watch TV, use the Internet, how much do you understand? Check the amount:

 everything \_\_\_ most \_\_\_ some \_\_\_ a little \_\_\_ very little

E. When you speak English, how much do other people understand?

 \_\_\_ everything \_\_\_most \_\_\_some \_\_\_a little \_\_\_very little

F. Order the skills that you need from 1 to 6. Number 1 is the most important and number 6 is the  least important to you at this time. Please use each number only one time.

\_\_\_ Reading   \_\_\_ Speaking

\_\_\_ Writing   \_\_\_Vocabulary

\_\_\_ Listening   \_\_\_ Speaking

\_\_\_ Pronunciation

**12. *Where* do you speak English regularly? Please check all that apply:**

Home ( ) Work ( ) With friends ( ) School ( ) Elsewhere ( ) (please list \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

**13. Have you ever taken an ESL class before?** Yes ( ) No ( ) **Worked with an ESL tutor before?** Yes ( ) No ( )

**14. Please check group you wish to join: English instruction (In person-level classes) ( )**

**( ) Civics/Culture/Citizenship (Online-Thursday) ( )**  **Fluency (Online-Monday) ( )**

**Phonics/Reading/Writing (TBA) ( )** **F2F (Online conversation-TBA) ( )**

**Welcome to Augusta (Online-Friday)** ( )

***ESL Adult Placement Guide***

**A. How would you like us to address you (name/nickname)?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. How much education did you receive in your country?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**C. Did you study English in your own country?** \_\_\_\_\_\_\_\_\_\_ (If yes, check those that apply:

Reading ( ) Writing ( ) Speaking ( ) How long? \_\_\_\_\_\_\_\_ What level? \_\_\_\_\_\_\_\_

**D. Are you taking English classes with other agencies here, if so, where and what is the class level?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**E. How did you hear about our program?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**F. If you were working in our country, what kind of work did you do?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**G. Tell me about your family.** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**H. What do you do in your spare time?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I. If you are working in Augusta or the surrounding area, what kind of work do you do?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DO NOT WRITE BELOW THIS LINE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Facilitator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_