## Lake County Library System Adult Literacy Program LEARNER MENTOR REPORT

Learner Name				
Mentor Name			Date	
Form of contact	Phone call	Email	Face-Face	Other
	[]	[]	[]	[]
Current status of learner's involvement: is the learner still meeting with his/her tutor, what progress has been made, any change of job status, what goals have been set or met, and any issues related to the tutoring experience				
Has the pairing been terminated? If yes, 'why?' and would the learner like to be reassigned?				
Comments, achievements, and/or problems				
Additional comments				
Learner Mentor – Enter time spent in hours:				

Continue on reverse if necessary. When completed please return to literacy contact. Thank you!