

Lake County Library System Adult Literacy Program LEARNER ORIENTATION

Adult Learner Name								
Orientation Tutor Name						Date		
Assessment	Learner Ques. []	ESLO A []	LitStart []	Slosson []	CASAS []	Assess Packet []	Voyager []	Learning Styles []
Learner Level	[] beginner [] intermediate [] advanced							
Learner Profile <i>(When possible, include learning strengths & challenges and computer skills)</i>								
Recommendations								
Learner Goals Questions Additional Information Comments								
Orientation components <i>(please check all that were completed)</i>	<input type="checkbox"/> Learner Information Form <input type="checkbox"/> Assessment <input type="checkbox"/> Literacy Calendar <input type="checkbox"/> Learner Agreement <input type="checkbox"/> Library Tour <input type="checkbox"/> Confirmed emergency contact information Name _____ Phone _____ Relationship _____							
<i>Tutor – enter time spent on orientation</i>								

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