

ESL Quarterly Progress Report

From _____ to _____ 20____

Tutor's Name	Student's Name	Date
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INSTRUCTIONS: With each student, review the last three months of tutoring and complete the following progress report. If possible, select some samples of your student's work to send with this report. Return your QPR to the Literacy Services-Indy Reads office within two weeks. If you have any questions, please call Indy Reads at 275-4040.

List some accomplishments this quarter. (Note: Even small achievements are very significant. Examples: greeted in English, recited the alphabet, named the days of the week, got a job, ordered food at a restaurant, had a telephone conversation in English, spoke English with family or friends, etc.)

Have your goals changed or expanded in the last three months? Have any goals been met? Explain.

List any external learning experiences that you and your student have done the past quarter. (Shopped for groceries, attended an Indy Reads event, visited a museum, etc.) How were these experiences beneficial?

What resources/tools/activities have you used?

- | | | |
|---|--|--|
| <input type="checkbox"/> Real World Materials
(newspapers, job related materials, menus, etc.) | <input type="checkbox"/> Laubach Way to English | <input type="checkbox"/> Dialogue/Role Playing |
| <input type="checkbox"/> Ability Series | <input type="checkbox"/> LifePrints Series | <input type="checkbox"/> Question Strips |
| <input type="checkbox"/> Writing/Journaling | <input type="checkbox"/> Teaching with Pictures | <input type="checkbox"/> Picture Dictionary |
| <input type="checkbox"/> Conversational English | <input type="checkbox"/> Crossroads Café | <input type="checkbox"/> Computer/Computer Lab |
| | <input type="checkbox"/> Total Physical Response | |

Report your Volunteer Hours for the past quarter.

Month: _____	Tutoring Hours _____	Prep Time _____	Travel Time _____	Other _____
Month: _____	Tutoring Hours _____	Prep Time _____	Travel Time _____	Other _____
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Are you and your student experiencing any barriers to learning such as transportation, scheduling conflicts, family commitments, personality, etc? Explain.

Please list any materials that you or your student would like to borrow or purchase. Note if the materials are for you or your student, the level of materials, and any title information you have.

At which IMCPL branch would you like to pick up these materials? _____

Share any questions, comments, or concerns you may have.

Would you like to be contacted by Indy Reads? Yes No

Please list any address, phone number or email changes.

Student's Name _____

Tutor's Name _____

New Address _____

New Address _____

New Phone Number _____

New Phone Number _____

New Email _____

New Email _____

Please return this report to:

Indy Reads
Library Services Center
2450 N. Meridian Street / Indianapolis, IN 46208
You may also fax it to us at 317-229-4588

Or, you can email the information to: office@indyreads.org

IF YOU HAVE MORE THAN ONE STUDENT AND NEED MORE COPIES, PLEASE LET US KNOW
AND WE'LL SEND YOU MORE

Would you like a copy of this QPR returned to you? _____
If so, what library should we send it to (it will be sent via inter-library mail)? _____