

VALENCIA COUNTY LITERACY APPLICATION

**BOOK READER**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Phone: Home: \_\_\_\_\_ Cell \_\_\_\_\_  
Work: \_\_\_\_\_ Is it ok to call you at work? Y N

e-mail address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male Female  
Month/Year/Date

Ethnic Group \_\_\_\_\_ Native Language: \_\_\_\_\_

What language(s) do you:  
speak \_\_\_\_\_ read \_\_\_\_\_ write \_\_\_\_\_

Occupation: \_\_\_\_\_

Education	Income Level:	Employment Status
< 12th grade	<5,000	Full time
H.S. Diploma	5-15,999	Part time
Some College	16-25,999	Unemployed
Undergrad. Degree	26-40,999	Disabled
Grad. Degree	>41,000	Retired
Not Available	Not Available	Not in Labor Mkt. Seeking Work

When are you available to read? M T W T F AM or PM

Do you have any special needs? \_\_\_\_\_

Do you have any special skills? \_\_\_\_\_

**To volunteer at some clinics a TB-Test and current Tetnus vaccination is required.**

Are you willing to have the TB-Test and Tetnus vaccination done? YES NO