

Group Location and Time: _____ Tutor: _____
 Month and Year: _____

Students, please initial each time you attend a session:

Student Name											Totals
Tutor Prep Time:											

Brief Outline of Lesson Plans (include dates):

Goals Achieved (write name of student(s) who achieved each goal):

_____ Worked on GED Studies	_____ Received Math or Computer Instruction
_____ Improved English Proficiency	_____ Got a Driver's License
_____ Completed pre-GED Studies	_____ Voted or Registered to Vote
_____ Completed GED Studies	_____ Enrolled in Adult Basic Education
_____ Passed GED Exam	_____ Met a Personal Goal
_____ Became Employed	
_____ Left Public Assistance	