

**Literacy Council of Carroll County, Inc.**

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Westminster, MD 21157

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NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

MONTH: \_\_\_\_\_ YEAR: \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_

**SUMMARY OF HOURS:**

Tutoring: \_\_\_\_\_ Lesson Prep: \_\_\_\_\_ Travel: \_\_\_\_\_

Office/Staff: \_\_\_\_\_ Fundraising: \_\_\_\_\_ Workshops: \_\_\_\_\_

Other Literacy Related Activities: \_\_\_\_\_ TOTAL HOURS: \_\_\_\_\_

**WHAT MATERIALS ARE YOU USING?**

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**FIRST LESSON OF THE MONTH:**

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**LAST LESSON OF THE MONTH:**

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**SERVICES PROVIDED TO STUDENT OTHER THAN TUTORING (i.e., transportation, assisting with personal problems, etc.):**

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**STUDENT'S PROGRESS (strengths, areas needing more help, homework):**

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**OTHER COMMENTS OR QUESTIONS:**

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When filling out your report, refer to your calendar. Give date for each book and lesson number or activity. Enter total volunteer hours, including activities other than tutoring (needed for our record keeping). State the reason for lesson cancellations. If tutoring stops, give date and contact Literacy Council Office. Send your form as an email attachment to [lcouncilcc@gmail.com](mailto:lcouncilcc@gmail.com), drop it off, or mail it to the office.

**Thank You for all you do!**