

**Sauk Prairie Area Literacy Council
Tutor Registration Form**

Name _____

Address _____ City _____

State _____ Zip _____ Home Phone _____

Work Phone _____ Cell Phone _____

Email _____

Education/Work Experience _____

Time you have available to tutor:

Hours per week _____

Any preferred days or hours? _____

Any special interests or skills you would like to share? _____

****PLEASE RETURN THIS FORM BY MAIL OR IN PERSON TO:**

**Heather Cole/Bilingual Library Aide, Prairie du Sac Public Library, 560 Park Ave.,
Prairie du Sac, WI 53578. When your form is received, you will be matched with a
student. Please call Heather Cole at 643-8318 if you have any questions. THANK
YOU for your interest in becoming a Sauk Prairie Area Literacy Council tutor. WE
WOULD NOT EXIST WITHOUT YOU!!**