

Contact Information Sheet

I would like to be added to your database

I would like to update my information for your database

Name _____

Organization _____

Organization Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Please Select: Program Director/Co-Director Instructor Support Staff Other

Home Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Please select all that apply:

Type of Organization

- ABLE-funded
- Federal Government
- State Government
- Local Government
- State Leadership Network
- Media
- Kent State University
- LINC/S
- Library

Program Types

- ESOL
- Family Literacy
- ABLE/GED
- Corrections
- Volunteer-based
- Workplace
- EFF
- Even Start
- Community Based Organization
- Learning Disability
- Numeracy Technology

Topic Areas

- Recruitment/Client Intake
- Motivation/Retention
- Evaluation/Assessment
- Professional Development
- Program Planning/Improvement
- Curriculum Development/Instruction
- Community Relations
- Interagency Collaboration
- Funding
- Policy
- Other

Ohio Literacy Resource Center

Enhancing Adult Literacy