



Literacy Volunteers of Illinois Volunteer Literacy Program Directory and Membership Form

Name of organization:

Name of program:

Business Address:

City/State/Zip:

Business Phone:

Fax:

Website address:

Program contact person's name:

Email:

Office hours:

What communities you serve:

Services your program offers (check all that apply):

Basic Reading ESL Math Pre-GED GED Family Literacy Citizenship

Employment Services One-to-One Small Group Classroom

Other (Please Note) _____

Volunteer needs (ex. reading, math, citizenship):