

# Ready Readers

## COLLEGE APPLICATION

Thank you for your interest in *Ready Readers*. We may provide your contact information to the preschool where you will be reading. We may also use this information to check your background and for internal purposes. You may send your application to us by email, fax or mail.

**Ready Readers**  
**1974 Innerbelt Business Center Dr, St. Louis, MO 63114**  
**314-825-8751, Fax: 314-564-8071**  
**e-mail: Diane@readyreaders-stlouis.com**

Date \_\_\_\_\_ Birthdate \_\_\_\_\_

Full name, including middle name \_\_\_\_\_ Nick name? \_\_\_\_\_

E-Mail Address (please **print**) \_\_\_\_\_

Current Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Land line ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

University/Major \_\_\_\_\_ If service work is required for credit, instructor's name: \_\_\_\_\_

Do you have a car? \_\_\_\_\_  
If yes, would you be willing to drop off/pick up anyone reading at the same time nearby? \_\_\_\_\_  
If no, can you get a ride to the school where you'll be going? \_\_\_\_\_

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### Sharing a Class:

Is there anyone you want to team up with when you go to read? If so, everyone must have the same schedule availability. If you know that they do, please provide their names and emails:

\_\_\_\_\_  
\_\_\_\_\_

### Your Availability:

Tell us all of the possible times that you are available Monday-Friday. The starting time should be the time you can be **at** the school. The ending time should be the time you must leave the school to get back to wherever you are coming from. For example, if you say "Monday from 9 to 11," that would mean you could be there by 9 and you would need to be gone by 11. Please give us as many days and time options as possible. In addition, please tell us where you will be traveling from to help us determine which of our available sites would be the best reading location for you.

Day(s) \_\_\_\_\_ Time span \_\_\_\_\_ Traveling from Home: \_\_\_ Yes \_\_\_ No  
Other (provide address): \_\_\_\_\_

Day(s) \_\_\_\_\_ Time span \_\_\_\_\_ Traveling from Home: \_\_\_ Yes \_\_\_ No  
Other (provide address): \_\_\_\_\_

Day(s) \_\_\_\_\_ Time span \_\_\_\_\_ Traveling from Home: \_\_\_ Yes \_\_\_ No  
Other (provide address): \_\_\_\_\_

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