

Camrose Family Literacy  
Referral Form

Date: \_\_\_\_\_

Referring Agency: \_\_\_\_\_

Programs you are referring to:

- Rhymes
- Building Blocks
- Literacy and Parenting Skills

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Ages of children: \_\_\_\_\_

Any allergies or medical conditions you are aware of?

Do you self-identify as Aboriginal? If so, First Nation, Métis or Inuit?

Do you self-identify as being from another cultural or language group? If so, which one(s)?

What language do you use at home and most speak of with your children?

How did you hear about this program?

Have you previously taken a Family Literacy program and with whom?

I give permission to contact Camrose Family Literacy with the above information.

\_\_\_\_\_

All programs are free of charge.

Please fax to 780-672-7621 or Email: famlit@camroselearning.com

Funded by the Government of Alberta and the Community of Camrose