



Name _____
 Title _____
 Program Name _____
 Organization _____
 Address _____
 City/State/Zip _____
 Telephone _____
 Fax _____
 E-Mail _____
 Website _____

How did you hear about Scholastic Literacy Partners?

- Scholastic Representative
- Internet
- Conference
- Mailing
- Magazine
- Another Literacy Partner
- Other _____

Please attach a detailed description of your organization, its mission and literacy efforts.

What is the primary focus of your organization?

- Reading/Education
- Health Services
- Child Care
- Community Service
- Shelter
- Library
- Tutoring/Mentoring
- Literacy Coalition/Council
- Resource Center
- Other _____

Is your program affiliated with a national organization?

- Yes No
 If yes, please identify: _____

How many children does your program serve? _____

What are the ages/grades of the children?

- Birth-4
- K-3 (Ages 5-8)
- 4-6 (Ages 9-11)
- 7-9 (Ages 12-14)
- 10-12 (Ages 15-18)

What percentage of the children in this program are:

- Caucasian _____%
- Asian American _____%
- Hispanic _____%
- Native American _____%
- African American _____%
- Pacific Islander _____%
- Other _____%

Please check the first language spoken in the homes of the children you serve:

- English
- Spanish
- Other _____

How would you describe your program's literacy activities? (Please check all that apply):

- Tutoring
- Family literacy
- Parent education
- Early childhood literacy
- ESL
- Adult literacy
- Professional development
- Home visits
- Other _____

Describe how books are used in your program:

What is the total estimated number of books your program purchases each year?

Please identify your program's funding sources and how long these funds will be available:

Funding Source _____
 Availability _____

Where do you purchase your books from currently?

Bookstore _____
 Wholesaler _____
 Publisher _____
 Other _____

Please provide the names of the resources you rely on to stay informed about literacy products, funding and other literacy news:

Catalogs _____
 Trade Magazines _____
 Newsletters _____
 Conferences _____
 Web sites _____
 Other _____

Please Submit to:

SCHOLASTIC Literacy Partners,
 524 Broadway, New York, NY 10012-3999,
 or
 Fax to: 877-719-1072.