REGISTRATION FOR AMERICAN CIVICS

PLEASI	E ENTER YOUR GREEN CARD NUMBER:		
	reen card number is located on the bottom een card number is the last 13 characters of		•
First Name:		Last Name:	
Address:		_ City:	State:
Cell Phone: Age		:	Gender: M or F
Email A	Address:		
Provid	e the expected Date of your immigration app	olication and/or test:	
Are yo	u available: (check all that applies)		
1)	Evenings 6 PM o 8 PM (Monday, Wednesda	ay, or Friday): YES	NO
2)	Daytime Saturday 10 AM to 12 Noon: YES	NO	
Please	answer the following:		
3)	Can you speak and understand information	ı in English: YES	NO
4)	Can you read English text: YES	NO	
5)	Can you write in English: YES	NO	
6)	Do you only speak Spanish: YES	NO	
7)	Have you completed tutoring on how to sp	eak English: YES	NO
8)	How many hours per week have you dedica	ated to studying for the	immigration test?
9)	How many hours can you commit to if you are accepted to our program?		