



Plainfield Public Library Referral Form

Original template by the Plainfield Public Library
Distributed through the New Jersey State
Library's 2015 Literacy Boot Camp

STUDENT NAME: _____

REFERRAL DATE: _____

RECEIVED DATE: _____

STUDENT ADDRESS: _____

STUDENT PHONE: _____

STATUS (receiving site): Enrolled Waiting List Referred Elsewhere _____ **Staff:** _____

To: From _____

Plainfield Public Library
800 Park Avenue
Plainfield, New Jersey 07060

908-757-1111 ext. 122

Staff _____

To: From _____

Staff: _____

Services referred for:

- GED Computer Training Microsoft Credential
 TABE Testing AOSOS Registration

Additional Notes: (see back)

Goals: Attainment of an industry recognized credential

Attainment of a GED

Functional Grade Level Advancement & Entrance
into an Occupational Skills Training Program

Direct Job Placement

Other _____

ATTACHMENTS: TABE Score Sheet AOSOS

Other: _____

STUDENT PRE-TEST TABE TEST DATE: ADMINISTERED BY:

Enroll in Program: Yes/No

Date: _____

Staff _____

Test Results:

	Reading	Math Comp	Math App	Math Total
GE:				