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## Asheville Augustine Project

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*providing free, long-term, 1-on-1 literacy tutoring for low-income children & teens*

**31 College Pl. B-221 Asheville, NC 28801**

**Niki Paganelli, Director**

**Email: [niki@litcouncil.com](mailto:niki@litcouncil.com) Telephone: 828-254-3442**

**[http://www.litcouncil.com/augustine\\_project.htm](http://www.litcouncil.com/augustine_project.htm)**

The Asheville Augustine Project began in 2010 and is a replication of The Augustine Project in Chapel Hill, NC. We train tutors who provide free, long-term, one-to-one instruction in reading, writing and spelling to low-income children and teens in WNC struggling with literacy skills. Our tutors receive 70 hours of classroom and practicum training in Orton-Gillingham-based teaching methods, a systematic, multisensory, phonetic approach to reading and written language that has been used successfully for over 50 years. Wilson Reading System® materials guide the lesson planning process. Tutors normally meet with their Augustine student twice a week at the child's school or afterschool program, if teachers and administrators are amenable. If you think your child is a good candidate for Augustine tutoring, please fill out this application and return it to the above address, or email it as an attachment to the director.

Student's name: \_\_\_\_\_

Street: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ School: \_\_\_\_\_

Birth date: \_\_\_\_\_ Grade: \_\_\_\_\_ Ethnicity: \_\_\_\_\_

(for statistical purposes only)

Teacher: \_\_\_\_\_ School \_\_\_\_\_

mClass Reading Level (circle one) A B C D E F G H I J K L M N O P Q R S T

Name of parent or guardian: \_\_\_\_\_

Please circle your highest level of education:

High School    GED    Bachelor's Degree    Master's degree    PhD    Other \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

Phone: (work) \_\_\_\_\_ (home) \_\_\_\_\_

Parent e-mail address \_\_\_\_\_

**Literacy Council of Buncombe County  
Asheville Augustine Project**

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Number of adults \_\_\_\_\_, children in the family \_\_\_\_\_ Student's birth order \_\_\_\_\_

Primary language spoken in student's home: \_\_\_\_\_

Family income \_\_\_\_\_ per week / month / year

Are there any unusual circumstances we should know about (family issues, medical concerns, repeated grades, etc)?

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Has your child ever been tested for a learning disability? \_\_\_\_\_

If yes, please include the test results if you have them.

If no, has your child ever been referred for testing for a learning disability or reading problem?

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May we use a picture of your child and his or her tutor in a brochure, newsletter, newspaper article or website about the Augustine Project? \_\_\_\_\_

May we talk to your child's teacher and/or guidance counselor to get additional educational information?

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May we have access to testing results your child's school has on file? \_\_\_\_\_

Please include any additional information about your child or family circumstances that might be helpful to us. All information will be kept confidential.

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Name of Augustine tutor (if known): \_\_\_\_\_

Signature of parent or guardian: \_\_\_\_\_

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

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