



## SIT STAY READ APPLICATION FOR COMMUNITY LITERACY PROGRAM

The application process for a SIT STAY READ program is a **three step process**: the written application, the on-site assessment/interview, and the executed Program Agreement, which outlines the responsibilities of the director, the program coordinator, and volunteers.

Center Name		Center Phone Number	
Center Address		City	Zip
Your Name		Your Position	
Your cell phone number	Your Email Address		
Best Way and Time to reach you		How did you hear about SIT STAY READ?	

**I. Center/Organization Information:** Please tell us about your organization and its client members by answering the questions below:

1. Please tell us about the children at your center:

	Number of these children at your center	Likely Number interested in a SSR Program
<b>1<sup>st</sup> Graders</b>		
<b>2<sup>nd</sup> Graders</b>		
<b>3<sup>rd</sup> Graders</b>		

2. Please estimate the percentage of students reading at their grade level.

3. What reading programs, if any, do you offer?

4. What other type of programs does your center offer children? What are the most popular programs? What might be a typical program for a 2<sup>nd</sup> grader?

## II. Center Population:

Please answer the following questions as it pertains to first through third graders in your center:

1. Approximately, what percentage of children are native English speakers? \_\_\_\_\_
2. Do you participate in any government funded programs that are offered to low-income clients? \_\_\_\_Yes \_\_\_\_No  
If so, please list the programs and the percentage of your population which participates.
3. What percentage of parents are active participants in member programs or activities?

## III. Staff and Other Professionals:

1. Please describe your community organization in terms of the staff and its responsibilities:
2. Are there any teachers or reading specialists? \_\_\_\_Yes \_\_\_\_No
3. If so, how many, and how are they integrated into the program?
4. Is it likely that some parents will be available to participate on a regular or ad hoc basis in the **SSR** program? \_\_\_\_Yes \_\_\_\_No

## IV. Community Description:

1. In what neighborhood is the community center located?
2. What elementary schools do children in your center attend?
3. Please describe the community in which your center is located.
4. Do you have working relationships with other local community organizations? (YMCA's, Boys & Girls Clubs, libraries, churches, etc.) \_\_\_\_Yes \_\_\_\_No  
If yes, please list and describe each partnership.

**V. Program Evaluation and Length:**

**SSR** programs are one hour per week at the same day and time. Programs can be a one-time demonstration session or may extend to four, six, or eight weeks.

1. Would you prefer a demo or a multi-week program?

**VI. Tell Us About Yourself:**

1. Why are you applying for an **SSR** program? How do you feel your center can benefit from a **SSR** program?
  
2. How will you incorporate the **SSR** program into your programming?
  
3. Are you willing to incorporate public library programs and other activities into your center to support the **SSR** program? \_\_\_\_Yes \_\_\_\_No

*By submitting this application, we acknowledge that we have reviewed the information set forth and believe that it is accurate to the best of our knowledge.*

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**Signature of Director**

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**Signature of Program Coordinator**

**SIT STAY READ** will respond to your application as soon as possible, usually within ten days. Thank you for your interest.

**Please return the completed form to SIT STAY READ.**

**Via Mail:**  
Sit Stay Read  
3425 N. Milwaukee Ave  
Chicago, IL 60641

**Via Fax:**  
773.545.6671

**Questions?**  
Call 773.545.6629