Basic Life Skills Lessons

Filling Out a Form
Learning Objective:
1) Understand common, universal information necessary to fill out a form
2) Effectively fill out a basic form ie: money wiring form, store discount form, basic health care form, driver's license application form, etc.

Materials:
1) Blank form that is included with this lesson
2) Other sample forms mentioned above when applicable
3) White board (or notebook)

LANGUAGE NOTE: The following lesson is intended to be taught entirely in Spanish for beginning English Language Learners. If your student has a more advanced language level, this same lesson can be taught using as much English as is appropriate. If your student is already familiar with the vocabulary used to send a money order, you can choose a more complex form, such as a dental or health form, and adapt the lesson accordingly.

LESSON NOTE: Use forms that are most applicable to meet the needs of the student. Discover how they send money to family in native country and assist them with these forms if helpful. Discuss how students may choose to deal with certain questions on a form such as social security number and number of dependents. Also discuss how the date is written in a different format in the United States.

<table>
<thead>
<tr>
<th>Time</th>
<th>Procedure</th>
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<tbody>
<tr>
<td>5 Minutes</td>
<td><strong>I. Give Pre-Assessment</strong></td>
</tr>
<tr>
<td>5 Minutes</td>
<td><strong>II. Warm-up</strong></td>
</tr>
<tr>
<td>10 Minutes</td>
<td><strong>III. Fill Out Form</strong></td>
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- **II. Warm-up**
  Discuss whether your students have any previous experience filling out common forms in either English or Spanish. For example, have they filled out money orders or doctor's office forms? Do they have discount cards for Rite Aid or local grocery stores?

- **III. Fill Out Form**
  a) Fill out the attached form with student. Begin with a form in Spanish and then fill out a form in English. This process will allow them to become familiar with the form if they aren’t already and gather the information they need to fill it out.
  b) Using the form as a reference, make a list together of new vocabulary on the white board (see vocabulary box above).
IV. Practice Vocabulary
Using the text on the white board as a visual aid, have the students repeat the English word after you say the Spanish word followed by the English word. Practice a few times until you can point to the words on the board and students can read them.

V. Form-Filling “Pictionary”
Once students are familiar with the words and can comfortably pronounce them, erase them from the board. Test and reinforce students’ knowledge of the words by playing “Pictionary.” For example, the teacher writes “802-279-3898” on the board and students say “phone number.” Teacher writes “López” and students say “Last name.”

VI. Practice Forms
a) Give students sample English-only forms to fill out using sample information (see sample information and form provided with this lesson). Use “scrambled” and/or regular form depending on level of difficulty your student needs.
b) Practice and reinforce any vocabulary that students struggled with when filling out the form.

VII. Give Post-Assessment
VIII. Conduct Skills Assessment Below
Give students a second copy of the English-only form and ask them to fill it out without assistance using their own information. Work together to complete any parts that the student may have left blank in order to review and reinforce any vocabulary they may not have mastered.

Enhancement Activities
Take a photo of the filled-out form with student’s cell phone camera for their future use when filling out forms.

Skills Rubric

<table>
<thead>
<tr>
<th></th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Student is unable to do task.</td>
<td>Student completes less than 7 sections of the form or completes it with assistance.</td>
<td>Student is able to complete 7-8 sections of the form without assistance.</td>
</tr>
</tbody>
</table>
Regular Sample Form

Date: ______________________

First Name: ___________________________ Last Name: ___________________________

Street Address: _________________________________________________________________

City: ___________________________ State: ____________ Zip Code: ___________

Phone Number: __________________________

Email: __________________________

Amount: __________________________

Sample Information

Fecha: September 12, 2011

Nombre: Pilar Apellido: Rosas López

Dirección de la calle: 1258 Town Farm Road

Ciudad: Chelsea Estado: Vermont (VT) Código Postal: 05038

Número de Teléfono: 802-522-3498

Cantidad: $500 USD
“Scrambled” Sample Form

Amount: ________________________________ Zip Code: __________________________

Street Address: ______________________________ Date: __________________________

Last Name: ____________________________ State: ________________________________

Phone Number: ______________________________

First Name: ____________________________ City: ________________________________

Email: ________________________________

Sample Information

Fecha: January 23, 2011

Nombre: Eduardo        Apellido: García de la Cruz

Dirección de la calle: 565 Brook Road

Ciudad: Braintree        Estado: Vermont (VT)        Código Postal: 05060

Número de Teléfono: 802-505-3105

Cantidad: $350 USD
Filling Out a Form
Pre-Assessment

Date: ____________________________
Name: ____________________________

Circle the correct answer.

1. When might you need to fill out a form?
   a. at the dentist or the doctor’s office
   b. when you send money to your family or friends
   c. when you send a package or letter
   d. all of the above

2. Amount means the place you would like to send your money or package.
   True False

3. What information might you need when filling out a form?
   a. your first name and last name
   b. your current phone number and address
   c. your birth date
   d. all of the above

4. Is date of birth the same as today’s date?
   Yes No

5. Should you write down all of the information you will need and bring it with you to the store, post office or doctor’s office?
   Yes No

Total Correct:_______

Developed by UVM Extension, Vermont Migrant Education Program, with funding from the Strategies, Opportunities and Services to Out-of-School Youth (SOSOSY) Migrant Education Program Consortium Grant (2013).
1. ¿En qué situaciones tendrías que llenar un formulario?
   a. en el consultorio médico
   b. cuando envías dinero
   c. cuando envías un paquete o una carta
   d. todos los anteriores

2. *Cantidad* significa el lugar a donde quieres enviar dinero o un paquete.
   Verdadero      Falso

3. ¿Qué información podrías necesitar al llenar un formulario?
   a. tu nombre y apellido
   b. tu número telefónico y dirección actual
   c. tu fecha de nacimiento
   d. todos los anteriores

4. ¿La *fecha de nacimiento* significa lo mismo que la *fecha del día de hoy*?
   Sí        No

5. ¿Debes anotar toda la información que necesitas y llevarla contigo a la tienda, oficina postal o consultorio médico?
   Sí        No

Total de Aciertos:_______
Filling Out a Form
Post-Assessment

Date: ____________________________
Name: ____________________________

Circle the correct answer.

1. When might you need to fill out a form?
   a. at the dentist or the doctor’s office
   b. when you send money to your family or friends
   c. when you send a package or letter
   d. all of the above

2. Amount means the place you would like to send your money or package.
   True False

3. What information might you need when filling out a form?
   a. your first name and last name
   b. your current phone number and address
   c. your birth date
   d. all of the above

4. Is date of birth the same as today’s date?
   Yes No

5. Should you write down all of the information you will need and bring it with you to the store, post office or doctor’s office?
   Yes No

Write your complete address including your first name, last name, street address or post office box, city, state, and zip code. Include your email address. (not scored) ____________________________________________
   ____________________________________________________________
   _______________________________________________________________

| Total Correct:_______

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Llenado de Formularios  
Post-Evaluación  

Fecha: ____________________________  
Nombre: ____________________________  

Circula la respuesta correcta.

1. ¿En qué situaciones tendrías que llenar un formulario?  
   a. en el consultorio médico  
   b. cuando envías dinero  
   c. cuando envías un paquete o una carta  
   d. todos los anteriores  

2. *Cantidad* significa el lugar a donde quieres enviar dinero o un paquete.  
   Verdadero  
   Falso  

3. ¿Qué información podrías necesitar al llenar un formulario?  
   a. tu nombre y apellido  
   b. tu número telefónico y dirección actual  
   c. tu fecha de nacimiento  
   d. todos los anteriores  

4. ¿La *fecha de nacimiento* significa lo mismo que la *fecha del día de hoy*?  
   Sí  
   No  

5. ¿Debes anotar toda la información que necesitas y llevarla contigo a la tienda, oficina postal o consultorio médico?  
   Sí  
   No  

Escribe tu dirección completa incluyendo tu nombre, apellido, nombre de la calle y número, o número de tu apartado postal, ciudad, estado, y código postal. Incluya su dirección de correo electrónico. (no calificar)  

| Total de Aciertos:_______  

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