

**Family Literacy Details**

\*Family Surname \_\_\_\_\_

\*Family Code \_\_\_\_\_

\*Date Adult Entered Family Literacy \_\_\_\_/\_\_\_\_/\_\_\_\_

\*Relationship to Enrolled Child (select one)

- Parent
- Grandparent
- Other relative
- Other

\*Household Status (select one)

- Head of single parent household
- Head or spouse/partner in two-parent household
- Head or spouse/partner no dependents
- Dependent member of household
- Dependent and single parent
- Living in group quarters
- Living alone

\*Adult Code \_\_\_\_\_