



FUNDING

The WestREAP Early Literacy Project is funded by the following organisations:

Tertiary Education Commission

-Foundation Learning Pool
(Literacy & Numeracy Funding)



*John Ilott Charitable
Trust*



Brochure Revised April 2009
Whakamana Te Whanau
Empowering Family Learning



**Whakamana Te Whanau
Empowering Family Learning**

*Early
Literacy
Project*

*For Children aged 3 1/2
to 5 years*



For More Information, contact:

Karen Greenslade
Early Literacy Manager

WestREAP
72 Tudor Street (P O Box 264)
Hokitika

Phone: (03) 755 8700 or
(03) 768 7435
0800 927 327

Fax: (03) 755 8237

Email: karen@westreap.org.nz or
westreap@westreap.org.nz

**Computers In Homes, WestREAP's
Information Technology literacy
programme may also assist you in
supporting your children's learning.
Phone as above.**

*-If you have any comments, concerns, or
queries regarding the Early Literacy Project,
contact;
Corrina Gestro-Best, Manager of WestREAP*



WHAT

The Early Literacy Project is one of WestREAP's Whakamana Te Whanau programmes designed to support family learning.



WHO

A caregiver/parent and child 3 ½ to 5 years old, will work with an Early Literacy Tutor from WestREAP.



WHY

To support family/whanau who feel they will benefit from their child gaining early literacy skills before they start school.



WHERE

Families will be visited in their homes by the Early Literacy Tutors.



HOW

They work alongside the caregiver/parent and the child, having fun with books.



TIMES

We are flexible and will arrange the best times to visit with each whanau.



HOW LONG

The programme consists of 2-18 sessions for one hour each week.



FREE IN YOUR HOME

The programme is funded through WestREAP and sponsors.



LENGTH OF PROGRAMME

We will meet with you to discuss what we can offer your family.



WHAT ABOUT...

Other Early Childhood commitments? It is vital to keep these up. Session times are designed to fit with your other commitments.



Are you interested?

Please complete and return this form to WestREAP.

Name: _____

Address: _____

Phone: _____

Child's Name: _____

Child's Age:
_____ Years _____ Months

Date of Birth/...../.....

