



Telephone & Post Office Skills



INTRODUCTION

Before tutors and students can begin planning lessons, goals need to be set according to those expressed by the student and his/her existing level of English. Once the goals have been set (to gain employment, to be able to shop independently, to be able to communicate with their children's teachers, etc.) then the planning can begin.

This packet (1 of 10) has been developed to assist tutors in creating lessons that will help students in a practical manner in their every-day life. Life skills are listed under each topic or subject with ideas for practice activities. The use of real-life material, e.g. actual application forms, the telephone directory, the newspaper, in the lesson provides the student an opportunity to practice in a safe, non-threatening environment. Some examples of real-life material are included.

To give the tutor and the student satisfaction that progress is being made toward the goals, an **Achievement Log** has been developed. The log is for the recording by the student of those accomplishments achieved beyond and outside the lesson time. It might be that your student can now make phone calls, help a child with homework, write a note or fill out an application form. An awareness of these changes will motivate your student to set the next goals.

Materials for These Techniques

Newspaper ads	3" x 5" index cards
Telephone Directories	Colored Markers
Post Office forms	Post-It Notes

TELEPHONE & POST OFFICE SKILLS

Here are some life skills that can be used as the basis for a lesson with suggestions for practice activities.

The Telephone:

1. Speak, read, and write numbers 9 through 0.
2. Speak and write own telephone number.

Suggestions: Exchange and record telephone numbers.

3. Call locally and long distance from a home phone.

Suggestions: Together practice making a phone call to each other. Call each other during the week. Practice making a variety of different calls, e.g. medical appoints, calls to the school to report a child's absence. Discuss telephone etiquette.

4. Call locally and long distance from a pay phone.

Suggestions: Together visit a pay phone. Examine the instructions. Practice making a call together. Ask your learner to call you during the week from a pay phone.

5. Use a phone card to make a call.

Suggestions: Discuss use of a phone card, where to buy phone cards, and which phone cards offer the best value.

6. Use a telephone directory White Pages or the Internet to look up specific names, phone numbers, and addresses.

Suggestions: Together examine different sections of the White Pages, e.g. government offices, important and emergency numbers, Zip Codes, maps, international calling, etc.

7. Use operator assistance to find a phone number.

Suggestions: Together practice making a call for directory assistance.

8. Call 911 in an emergency.

Suggestions: Discuss uses of the emergency number and what information should be given when making an emergency call.

9. Understand the use of cell phones.

Suggestions: Discuss cell phone plans and costs and cell phone etiquette.

10. Read and use the Yellow Pages and Internet to find information.

Suggestions: Discuss the different kinds of information found in the Yellow Pages and on the Internet. Select a business and list the information needed to obtain service: telephone number, address, hours open, etc.

11. Read and understand a telephone bill.

Suggestions: Collect a variety of telephone bills. Examine the bills. Choose the words that the learner needs to know to understand the bill.

12. Practice calling the telephone company to discuss a bill discrepancy.

13. Understand and use toll free (1-800 and 1-888) numbers.

14. Leave and take a telephone message.

Suggestions: Leave messages for each other.

15. Leave a recorded message on an answering machine or voice mail.

Suggestions: Leave messages for each other.

16. Request a phone service from a telephone company.

Suggestions: Practice a telephone conversation requesting a service. Compare telephone plans and costs.

17. Listen and respond to phone menus.

18. Discuss how to handle telemarketing calls.

Suggestions: Role play different responses to telemarketing calls.

The Post Office:

1. Ask for and purchase stamps over the counter.

Suggestions: Together practice asking for stamps. Visit a post office, read the signs posted, and buy stamps. Discuss different places to purchase stamps.

2. Purchase stamps at a vending machine.

Suggestions: Together visit a machine, read the instructions, and purchase stamps.

3. Mail letters.

Suggestions: Write a short note or post card, address the envelope or card, and mail it. Discuss the importance of Zip Codes and where to find them.

4. Understand how to use certified mail, express mail, and other mail services.

Suggestions: Collect the necessary forms. Select the words that the learner needs to know. Practice filling in the forms. (See pages 8-9).

5. Understand how to send packages.

Suggestions: Discuss different carriers and costs. Collect the necessary forms. Select the words that the learner needs to know. Practice filling in the forms. (See pages 8-9).

6. Understand postal rates and costs for different types of mailing services.

7. Read pick-up schedules on mail boxes.

Suggestions: Visit and examine mail boxes.

8. Request that the Post Office hold or forward your mail.

Suggestions: Discuss when mail is held and when it should be forwarded. Practice filling out the necessary forms. (See page 11).

9. Fill out a "Change of Address" form. (See page 10).

10. Request a money order.

Activities for Building Vocabulary

Scavenger/Treasure Hunt: Make a list of words relating to the topic being studied, e.g. food, furniture, dictionary terms, etc. and ask the student to find them as you follow along, or if feasible, bring the objects to you. Variation: Say the word and ask the student to write the word on a Post-It Note and attach it to the located object.

Scrabble Game. Distribute the Scrabble tiles as directed by the game. Ask the student to spell out any word he/she can with these pieces. Play and score as in regular Scrabble as you and the student compete for points. Variation: Have student throw a die to determine how many tiles can be picked from all the tiles on the table and used to form words.

Reading Numbers. Create a deck of cards consisting of one digit on each card. Shuffle and lay down three cards, for example 352, and read the number aloud. Ask student to place one card next to any of the three digits and then read aloud the resulting number. For example, placing a 4 next to the first card results in “four hundred fifty-two.” Placing a 4 next to the second card results in “three thousand four hundred fifty-two.” Variation: Place a dollar sign to the left and include a decimal.¹

Board Game. Trace around a quarter to form a series of circles across the top, bottom, and both sides of a sheet of paper. Write a vocabulary word inside each circle. Ask student to roll a die and move his/her marker (button or penny) that many spaces and then say a sentence using the word on which he/she landed. Variation: Play the same way but student asks a question using the word landed on.²

Dictation. Select or compose a short story or passage containing vocabulary words studied. Dictate the story. Provide the student with a printed version of the story with lines representing words omitted. Ask the student to listen to the story and write in the missing words on the lines provided as the dictation is given. Gauge the number of missing words according to the ability of the student—provide a small number for beginners and a larger number for more advanced students. Variation: Record the story on a tape so the student can do it as homework and can listen to the tape as often as needed.

Strip Story. For beginning students, write each sentence that makes up a short story on strips of paper. For more advanced students write the main events that make up a story on strips of paper, one event to each strip. Read the story to the student or ask the student to read it. Ask the student to arrange the strips of paper in the proper order of the story.

Concentration. Write matching pairs of vocabulary words on cards, e.g. holidays and the dates, antonyms, synonyms, idioms, etc. Place the cards face down on the table. Student turns over one card and tries to find the matching card. If cards match, they are left on the table face up. If cards do not match, both cards are turned over and two more cards are selected. Game continues until all cards have been turned over. Variation: Play this game with two or more students.

¹ Source: Hands-on English, Vol. 11, No. 1, May/June, 2001.

² Source: Hands-on English, Vol. 12, No. 5, January/February, 2003.

Create Your Own Wordsearch

Name: _____ Date: _____

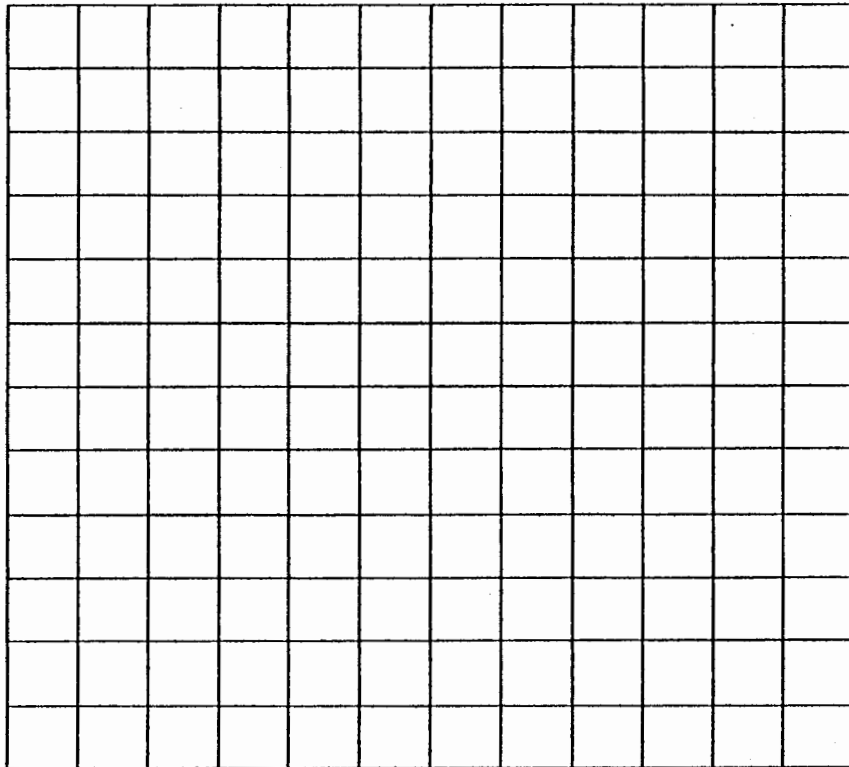
I	M	A	I	L	N	O	L	I	X	A	M
Y	R	E	I	A	P	H	O	N	E	F	E
A	T	K	L	I	M	D	N	E	A	K	S
D	N	U	M	B	E	R	G	I	Z	W	S
D	Y	Z	I	P	C	O	D	E	R	C	A
R	O	E	N	M	G	Q	I	A	L	L	G
E	X	H	E	L	L	O	S	E	K	B	E
S	E	A	L	S	T	S	T	A	M	P	S
S	T	E	L	E	G	O	A	M	C	W	E
T	P	O	H	I	L	D	N	E	G	U	N
P	Q	Z	I	J	L	N	C	W	C	K	J
A	R	E	A	C	O	D	E	X	J	B	O

Words:

- ✓ 1. HELLO
- 2. NUMBER
- 3. AREA CODE
- 4. LONG DISTANCE
- 5. MAIL
- 6. STAMPS
- 7. MESSAGES
- 8. PHONE
- 9. ZIP CODE
- 10. ADDRESS
- 11. TELEGRAM

Create Your Own Wordsearch

Name: _____ Date: _____



Words:

Registered No.		Date Stamp		8	
To Be Completed By Post Office	Reg. Fee \$				
	Handling Charge \$	Return Receipt \$			
	Postage \$	Restricted Delivery \$			
	Received by				
To Be Completed By Customer (Please Print) All Entries Must Be In Ballpoint or Typed	Customer Must Declare Full Value \$		<input type="checkbox"/> With Postal Insurance	Domestic Insurance up to \$25,000 is included in the fee. International Indemnity is limited. (See Reverse).	
			<input type="checkbox"/> Without Postal Insurance		
	FROM				
	TO				

PS Form 3806, **Receipt for Registered Mail** Copy 1 - Customer
 June 2002 (See Information on Reverse)

For delivery information, visit our website at www.usps.com®



Mailing Label
Label 11-B, March 2005

UNITED STATES POSTAL SERVICE® **Post Office To Addressee**

PRESS HARD. YOU ARE MAKING 3 COPIES.

ORIGIN (POSTAL SERVICE USE ONLY)			
PO ZIP Code	Day of Delivery	Postage	
	<input type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 2nd Del. Day	\$	
Date Accepted	Scheduled Date of Delivery	Return Receipt Fee	
Mo. Day Year	Month Day	\$	
Time Accepted <input type="checkbox"/> AM <input type="checkbox"/> PM	Scheduled Time of Delivery	COD Fee \$	Insurance Fee \$
Flat Rate <input type="checkbox"/> or Weight	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Total Postage & Fees \$	
lbs. ozs.	Int'l Alpha Country Code	Acceptance Emp. Initials	

DELIVERY (POSTAL USE ONLY)		
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Date	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	

CUSTOMER USE ONLY	
PAYMENT BY ACCOUNT Express Mail Corporate Acct. No.	<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Mail Only) Additional merchandise insurance is void if customer requests waiver of signature. I wish delivery to be made without obtaining signature of addressee or addressee's agent. If delivery employee judges that article can be left in secure location and I authorize that delivery employee's signature constitutes valid proof of delivery.
Federal Agency Acct. No. or Postal Service Acct. No.	
<input type="checkbox"/> NO DELIVERY Weekend Holiday	<input type="checkbox"/> Mailer Signature

FROM: (PLEASE PRINT) _____ PHONE () _____

TO: (PLEASE PRINT) _____ PHONE () _____

FOR PICKUP OR TRACKING
 Visit www.usps.com
 Call 1-800-222-1811

ZIP + 4 (U.S. ADDRESSES ONLY. DO NOT USE FOR FOREIGN POSTAL CODES.)

					+				
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FOR INTERNATIONAL DESTINATIONS, WRITE COUNTRY NAME BELOW.

7003 3110 0001 8921 3034

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™



7003 3110 0001 8921 3034
7003 3110 0001 8921 3034

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Sent To _____
 Street, Apt. No.; or PO Box No. _____
 City, State, ZIP+4 _____

PS Form 3800, June 2002

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2. Article Number
 (Transfer from service label)

PS Form 3811, August 2001

COMPLETE THIS SECTION ON DELIVERY

A. Signature _____ Agent
 Addressee

B. Received by (Printed Name) _____

C. Date of Delivery _____

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

Domestic Return Receipt

102595-02-M-1540

VE 826 579 062 US

United States Postal Service
INSURED MAIL
DOMESTIC - INTERNATIONAL



VE 826 579 062 US
VE 826 579 062 US

NOTE: To file a claim for damage or loss of contents, the article, container, and packaging must be presented.

**U.S. Postal Service
INSURED MAIL RECEIPT**

OFFICIAL USE

Postage	\$
Insurance Fee	
Restricted Delivery Fee (Domestic only; endorsement required)	
Special Handling Fee	
Return Receipt Fee (Except for Canada; endorsement required)	
Total Postage & Fees	\$

Fragile Liquid
 Perishable
Insurance Coverage: _____

Postmark
Here

Sent to: _____
 Street, Apt. No.; or PO Box No. _____
 City, State, ZIP+4, Country _____

PS Form 3813-P, July 2002

See Reverse for Instructions

OFFICIAL MAIL FORWARDING CHANGE OF ADDRESS ORDER

OFFICIAL USE ONLY

Please PRINT items 1-10 in blue or black ink. Your signature is required in Item 9.

1. Change of Address for: (Read Attached Instructions)
Individual (#5) Entire Family (#5) Business (#6) 2. Is This Move Temporary? Yes No

3. Start Date: (ex. 02/27/04) 4. If TEMPORARY move, print date to discontinue forwarding: (ex. 03/27/04)

5a. LAST Name & Jr./Sr./etc.

5b. FIRST Name and MI

6. If BUSINESS Move, Print Business Name

PRINT OLD MAILING ADDRESS BELOW: HOUSE/BUILDING NUMBER AND STREET NAME (INCLUDE ST., AVE., CT., ETC.) OR PO BOX

7a. OLD Mailing Address

7a. OLD APT or Suite

7c. OLD CITY

7b. For Puerto Rico Only: If address is in PR, print urbanization name, if appropriate.

7d. State

7e. ZIP

PRINT NEW MAILING ADDRESS BELOW: HOUSE/BUILDING NUMBER AND STREET NAME (INCLUDE ST., AVE., CT., ETC.) OR PO BOX

8a. NEW Mailing Address

8a. NEW APT/Ste or PMB

8c. NEW CITY

8b. For Puerto Rico Only: If address is in PR, print urbanization name, if appropriate.

8d. State

8e. ZIP

9. Print and Sign Name (see conditions on reverse)

Print:

Sign:

10. Date Signed:

(ex. 01/27/04)

OFFICIAL USE ONLY

Zone/Route ID No.

--	--	--	--	--	--	--	--	--	--

Date Entered on Form 3982

M	M	D	D	Y	Y

Expiration Date

M	M	D	D	Y	Y

Clerk/Carrier Endorsement

--	--	--	--	--	--



We can hold your mail for a minimum of **3**, but not for more than **30 days**.

Authorization to Hold Mail

NOTE: Complete and give to your letter carrier or mail to the post office that delivers your mail.

Postmaster: Please hold mail for:

Name(s)		<input type="checkbox"/> A. Please deliver all accumulated mail and resume normal delivery on the ending date shown below. <input type="checkbox"/> B. I will pick up all accumulated mail when I return and understand that mail delivery will not resume until I do so.
Address (Number, street, apt./suite no., city, state, ZIP + 4)		
Beginning Date	Ending Date (May only be changed by the customer in writing)	Customer Signature

For Post Office Use Only

Date Received	
Clerk	Bin Number
Carrier	Route Number

Complete this section only if customer selected option B)

<input type="checkbox"/> Accumulated mail has been picked up.	Resume Delivery of Mail (Date)	By
---	--------------------------------	----

PS Form **8076**, April 2002


Send this card to magazines, businesses, friends and family to let them know you've moved.

Please send mail to my new address starting: ___/___/___
Month Day Year

My Name: _____

Old Address: _____
STREET OR PO BOX APT./SUITE #
CITY OR POST OFFICE STATE ZIP+4

New Address: _____
STREET OR PO BOX APT./SUITE #
CITY OR POST OFFICE STATE ZIP+4



For all your moving needs, visit Lowe's.

To locate a store nearest you call
1-800-44-LOWES.


Send this card to magazines, businesses, friends and family to let them know you've moved.

Please send mail to my new address starting: ___/___/___
Month Day Year

My Name: _____

Old Address: _____
STREET OR PO BOX APT./SUITE #
CITY OR POST OFFICE STATE ZIP+4

New Address: _____
STREET OR PO BOX APT./SUITE #
CITY OR POST OFFICE STATE ZIP+4



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To locate a store nearest you call
1-800-44-LOWES.

The U.S. Postal Service does not endorse specific products or services listed here, and will not be held liable in any manner for any losses, damages or consumer dissatisfaction associated with their use.

ACHIEVEMENT LIST OF REAL LIFE SKILLS USING ENGLISH

Name of learner: _____ Date: _____

Name of tutor: _____

What have you achieved and what are you able to do now or do better in everyday life?	Listen	Speak	Read	Write
Write and speak home telephone number		✓	✓	✓
Use a pay phone for local calls.	✓	✓	✓	
Take telephone messages	✓	✓		✓

Check (✓) any changes/achievements:

	✓	Date
Received US Citizenship		
Registered to Vote or Voted for the first time		
Gained Employment		
Obtained Job Advancement		
Obtained GED		
Entered other Ed. or Voc. Program		

What do you still want to learn?

What do you want to be able to do?
