



PEER TUTORING APPLICATION FORM

Name: _____ PIN _____ Grade: _____

Phone #: _____

Email Address: _____

SUBJECTS YOU WISH TO TUTOR:

1. Subject: _____

Subject Teacher Signature: _____

2. Subject: _____

Subject Teacher Signature: _____

3. Subject: _____

Subject Teacher Signature: _____

GRADE LEVEL YOU ARE WILLING TO TUTOR:

1 2 3 4 5 6 7 8 9 10 11 12

DAYS YOU ARE WILLING TO TUTOR:

Monday Tuesday Wednesday Thursday Friday Weekend

I understand that being a tutor is a big responsibility. I am willing to undertake the challenge of being a Peer Tutor.

PEER TUTOR'S SIGNATURE: _____

PARENT'S SIGNATURE: _____

STUDENT SERVICES APPROVAL: _____

PLEASE RETURN APPLICATION TO STUDENT SERVICES.