email_logo

Request for Tutoring

## *$10.00 non-refundable fee for 10 hours of tutoring*

|  |  |  |  |
| --- | --- | --- | --- |
| **STUDENT INFORMATION** | | | |
| Student  Name |  | Student # |  |
| Current  Address |  | Home  Phone # |  |
| City |  | Cell  Phone # |  |
| Postal Code |  | Program |  |
| Email\* |  | | |

\*Only your email address will be shared with your tutor unless instructed otherwise

|  |  |
| --- | --- |
| **ADDITIONAL INFORMATION** | |
| Campus | College Drive Commerce Court Aviation |
| Registered | Student Success Services First People Centre First Generation |

|  |  |  |  |
| --- | --- | --- | --- |
| **COURSES TO BE TUTORED** | | | |
| Course  Code |  | Course Name |  |
| Instructor’s Name |  | Instructor’s  Signature\* |  |
| Date |  | Comments |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Course  Code |  | Course Name |  |
| Instructor’s Name |  | Instructor’s  Signature\* |  |
| Date |  | Comments |  |

***\*Instructor’s signature indicates that the student requesting tutoring has been attending classes regularly and the student is putting forth reasonable effort in an attempt to be successful****.*

|  |  |  |  |
| --- | --- | --- | --- |
| **STUDENT SIGNATURE** | | | |
| THIS AGREEMENT ENTITLES YOU TO 10 HOURS OF TUTORING (optional additional hours per fee)  I authorize a review of my attendance and/or grades through D2L, the faculty or the Admissions office. | | | |
| Signature |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **OFFICE USE ONLY** | | | |
| Tutor |  | Contacted: |  |
| Tutor |  | Contacted: |  |
| Initial Fee Paid Pay sheet given Notes: | | | |