



REQUEST FOR TUTORING

Your Name _____ Today's Date _____

E-Mail address that you use _____ Phone # _____

Course(s) you need tutoring in _____

Check below ALL times when you are AVAILABLE to meet with a tutor.

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8:00					
9:00					
10:00					
11:00					
12:00					
1:00					
2:00					
3:00					
4:00					
Evening					

I understand the following:

Please initial:

- I can receive up to two hours of tutoring per week per course. _____
- I will come to tutoring sessions prepared: read assignments, attempt homework, and write down questions I may have. _____
- I will notify my tutor in advance if I will be late or unable to make my appointment. _____
- The tutor will not do my homework, assignments, or quizzes for me. _____
- I must meet on campus (not in the dorms) for my tutoring sessions. _____
- I give permission to the Center staff to speak with my instructors of classes for which I am receiving tutoring if necessary and to access my grades for reporting purposes. _____
- I will attend class regularly. Tutoring is not a substitute for class. _____
- The tutor may drop me if I miss two scheduled tutoring sessions. _____

**Center for Academic Success, MCC Room 208
874-6152 or ged@milesc.edu**

Office Use

Tutor assigned: _____	Tutor contact info: _____
Date submitted to CAS _____	Date tutor was contacted: _____
Follow up:	