

For office use only:

Tutor _____ Tutor Phone Number _____ Tutor e-mail _____

Date Settled _____

Student Support Services Tutor Request Application

Name _____

Course _____

Phone number _____

Instructor _____

E-mail address _____

Date Requested _____

Current class schedule:

Best times for tutoring:

_____ **I am interested in becoming involved in a Student Support Services group study session.**

_____ I understand that Tutorial Services offers math/writing/reading assistance for all IU East students, and that I need to take advantage of the study and learning opportunities offered there.

_____ I understand that my course may offer supplemental instructors, study tables, or department teaching assistants, and that I need to take advantage of those study and learning opportunities.

_____ I understand that in order to work most efficiently with a tutor, I must have course reading assignments and homework done before the tutoring session.

_____ I understand that although the Academic Development Coordinator will try to find a tutor who can tutor when it is convenient for me, I may have to alter my schedule in order to meet with a tutor.

_____ I understand that I may discuss with the Academic Development Coordinator any concerns I have about the quality of tutoring.

_____ I understand the importance of consistent attendance for tutoring sessions; if I miss tutoring appointments without notifying my tutor or Student Support Services, I risk losing my tutoring privileges.

_____ You may give my phone number and e-mail address to the tutor so she/he can reach me at home.

Signed

Date