

Individualized Tutoring Request Form

Name: _____

Grade: _____

Phone # _____

Classes you need assistance in:

- 1.
- 2.
- 3.

What particular aspect of class do you need assistance in?

When are you available to meet with the tutor? (Day and time)

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

**Please turn the completed form into Mr. Lynn
(Mailbox in the Prep office)**

Office Use Only. Do not write below this line

Date received: _____

Received by: _____

Tutor assigned (name/phone #) _____

Scheduled meeting times for students: _____

Arranged by: _____ (Faculty member)