

TUTEE INFORMATION SHEET

Name _____ Student ID# _____

Phone _____ E-mail _____

Address or Campus Box # _____ Date _____

Please answer the following questions completely (and truthfully!)

1. Class(es) in which you need assistance:

Class	Faculty Signature
_____	_____
_____	_____

2. Are you attending this/these class(es) regularly? _____yes _____no
If not, why not? _____

3. I have completed _____ percent of the assigned reading so far.

4. I have completed _____ percent of the assigned homework so far.

5. Briefly describe what you see as hindering your progress in this course. Please be as specific as possible.

6. Are there any additional situations or conditions that may be related to your performance in this course (i.e. a learning disability, etc.)?

FOR OFFICE USE ONLY

Tutor Assigned _____ Yes Tutor's Name _____ Phone # _____

Tutor's e-mail _____ Date Assigned _____

_____ No Reason not found _____