

National Honor Society Request for Tutor Form

Name of Student: _____ Homeroom Teacher _____

Name of Course: _____ Teacher: _____

Grade 9 10 11 12 Class Period: _____ Date of Request: _____

To Be Completed by the Student: Please print clearly

Home Phone: _____ Cell Phone: _____

E-mail: _____ Facebook name _____

Please place a **checkmark** during periods when you are available for tutoring (lunch periods and study hall periods):

	Day A	Day B	Day C	Day D	Day E	Day F
Per 1						
Per 2						
Per 3						
Per 4						
Per 5						
Per 6						
Per 7						
Per 8						

If you are available for tutoring AFTER SCHOOL please circle the days you are available (45 minute time block)

Monday Tuesday Wednesday Thursday Friday

Teacher comments:

Return this form to Ms. Gloeckler's mailbox.