

**Lebanon High School
Request for Peer Tutor Assistance**

Student Name: _____ Grade: _____ Date: _____ Have you used LHS Peer Tutoring before? Yes No

Phone #: _____ Student E-mail: _____ Parent E-mail: _____

Do you want a one-time drop in tutor session, or on-going tutoring? On-going Drop in

Class(es) which you would like assistance with and your current grade: Class: _____ Current Grade (%): _____

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List specific assignments or areas of the class you would like help with. If you are not sure, ask your teacher for help in filling this part out.

(You must bring all related materials, books, assignments, etc., to your tutoring session.)

If you are requesting on-going assistance, select the times you are available for tutoring:

Before School: 7:00-7:45 (Tuesday, Wednesday, Thursday Friday) After School: 3:00-3:45 (Tuesday, Thursday Friday)

As a student requesting academic assistance, I understand and agree to the following:

1. I will be matched with a Peer Tutor who has been trained by Lebanon High School.
2. I will show up on time and with all necessary materials for each tutoring session.
3. If I can't make a confirmed appointment time, I will notify my Peer Tutor or the PT supervisor *before* the appointment time.
4. I will meet with my counselor every two weeks for a progress check. This is *required* to continue with tutoring.
5. I will continue to seek help from my classroom teacher, keep up with my homework, and ask questions in class, to help myself continue to learn.

Student Signature: _____ Date: _____