



2009-2010 Academic Year Tutoring Request Form

If you are interested in your child(ren) being tutored during the academic year (August 31st, 2009 – June 4th, 2010), please complete the lower portion of this form and return it to me at Summit Schools.

I will contact families on a first come, first serve basis to arrange tutoring sessions for your child(ren). If you have any questions, please do not hesitate to contact me at 294-2036, ext. 226, or by e-mail at tpetersen@summit.pvt.k12.ia.us. Thanks!

Terri Petersen, Tutor Manager

Date: _____

_____ **YES!** I'd like my child tutored at Summit Schools during the '10 Academic Session, starting on August 31, 2009.

Child's Name: _____ Age: _____

Grade entered in Fall 2009: _____ School Attending: _____

Parent/Guardian Names: _____

Phone (H): _____ Phone (W): _____ Cell: _____

Email: _____

Address: _____

Circle subject area for tutoring:

Orton-Gillingham	Reading	Math
Writing	Study Skills	Homework Help
Other: _____		

Circle day(s) and time preferred for tutoring:

Number of times a week: 1 2 3 4 5

Day(s) preference: Monday Tuesday Wednesday Thursday Friday

Time of day preference: (please give as much of a span as possible)

1st choice _____

2nd choice _____

3rd choice _____

4th choice _____