

Tutor Information Sheet

Fall 2014

NAME:

G#: PHONE #:

EMAIL: CLASS STANDING:

MAJOR: MINOR:

LIST OF CLASSES YOU CAN TUTOR:

|  |  |
| --- | --- |
| Course Code | Course Number(s) |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

AVAILABILITY

(Between the hours of 8am and 10pm)

|  |  |
| --- | --- |
| SUNDAY |  |
| MONDAY |  |
| TUESDAY |  |
| WEDNESDAY |  |
| THURSDAY |  |
| FRIDAY |  |

My signature indicates that Tutoring Coordinator, Joe Miller, has my permission to view my academic transcript and class schedule on Banner for purposes of determining eligibility to tutor particular courses and creating a work schedule.

Signature: Date: