

OLATHE SOUTH HIGH SCHOOL

PEER TUTOR REQUEST FORM 2015-2016

Name: _____ Date: _____

Grade: 9th 10th 11th 12th

E-mail (*write neatly!*): _____

Phone number: (_____) _____

Subject you wish to receive tutoring in: _____

Teacher of the course: _____

Times you are available to meet for tutoring (*check all that apply*):

	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>
7:30-8:00 am					
1 st half of seminar					
2 nd half of seminar					
3:00 – 3:30 pm					

Next Steps & Reminders for Student Requesting Peer Tutor:

- You will be notified by e-mail as soon as a tutor has been assigned to you.
- It is your responsibility to contact the assigned peer tutor to set up a time and place to meet.
- Tutoring must take place between the hours of 7:30AM and 3:30PM.
- You may work with your tutor in the OSHS Library or in the falcon's nest (if available).

Please return this form to Mr. Stoppel in the main office

Office Use Only

Date Received _____

Date Tutor assigned _____

Name of Tutor _____