

## **SCPA Peer Tutor Info**

Name		Advisor		
Email*		Phone Number*		
_	_	of the students you and phone number	_	
Subjects you want to tutor:				
Which grade levels are you comfortable working with?				
5 <sup>th</sup>			7 <sup>th</sup>	8 <sup>th</sup>
9 <sup>th</sup>		.10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>
Availability: Please circle the days you are available to tutor.				
Monday 8:30-9:15	Tuesday 8:30-9:15	Wednesday 8:30 – 9:15	Thursday 8:30-9:15	Friday 8:30-9:15
Not Available	4:00 – 4:45	Not Available	Not Available	Not Available
I am giving (student name)student.			permission to tutor another	
Parent/Guardian signature				
*Please email Erin Richgels (erichgels@stcroixprep.org) with any questions or concerns.				