

Friends of Art and Design HS Tutoring Program
Student Application
Return form to Tutoring Rm 215

Date _____

Grade: 9, 10, 11, or 12 (Circle One)

Last Name: _____

Lunch Period: _____

First Name _____

Email Address _____

Telephone#: _____

Cell#: _____

Address: _____

Please check all subjects in which you would like help:

___ Reading/Literature

___ English/ ESL

___ Writing/Composition

___ SAT/Regents: Verbal ___ Math ___

___ Biology _____ Chemistry _____ Earth Science _____ Physics

___ Global Studies

Math - Level: _____

___ Spanish _____ French

___ Other Subjects: _____

Other Information: _____

Coordinator Use

Tutor: _____ Teacher: ___ Subject: _____ Date: _____

Tutor: _____ Teacher: ___ Subject: _____ Date: _____