TUTORING DOCUMENTATION

This form certifies that _____ hours of tutoring were provided in _____.
(Subject)

DATE	START TIME	END TIME	SIGNATURE OF TUTORED STUDENT	TOTAL HOURS

Tutor's Signature_____

Tutor's Name_____

Tutor's Address_____

_____

Tutor's Social Security Number_____

High School Counselor's Signature_____

Tutor is a:

___High School Student
___High School Teacher
___Adult Teacher Aide
___Middle School Teacher

Middle school and high school teachers who serve as tutors for the ETS program should be aware that it may be considered unethical to be paid to tutor students during contract hours. Teachers should review the terms of their contracts and/or consult with their supervisors for guidance on this issue.