

SSS TUTEE PACKET

- **NEED A TUTOR?** Completely fill out each page in the Tutee Packet.
- A referral form is needed for each class that you need a tutor in (only one referral attached to packet). Other referral forms are available in the file pocket posted up by the Academic Skills Advisor's office (Strickland Building, Room 131).
- Turn in the completed packet to Pamela Morgan, Academic Skills Advisor.

James Sprunt Community College
Student Support Services

REQUEST FOR TUTORING FORM

Name: _____

Address: _____

Phone Numbers:

Home : _____ Work: _____ Cell: _____

E-mail Address:

JSCC E-mail Address: _____@mail.jamessprunt.edu

Personal E-mail Address: _____

Which course(s) do you need a tutor for? _____

*** LIST YOUR **COMPLETE** SCHEDULE OF CLASSES FOR THIS SEMESTER.**

COURSE(S)	DAY(S)	TIME(S)

List all of the days and times that you are available for tutoring.

James Sprunt Community College
Student Support Services

TUTEE AGREEMENT FORM

Obligations of Tutee:

1. Attend sessions and be prepared to keep the tutor informed and up to date on all class assignments.
2. Be prepared to demonstrate to the tutor that you are fulfilling your class assignments to the best of your abilities.
3. Come prepared for all tutoring sessions with any work previously suggested by the tutor.
4. **If you are unable to attend a tutoring session, you will notify the Academic Skills Advisor prior to the tutoring time.**
5. You must complete all forms and provide all required information needed before you are assigned a tutor.
6. The tutor and tutee must sign the SSS Tutor Service Log before each session. (Please round off the time to every five (5) minutes.) **Tutoring can not occur during a scheduled class time.**
7. If you miss two tutoring sessions within a scheduled monthly pay period -- example June 1 – June 30, a hold will be put on the tutoring services. (This means if you do not show up and/or do not give a 24-hour notice.) The tutor will not return for your tutoring session until you speak with the Academic Skills Advisor and/or Project Director. A letter will be sent to the tutee to share their missed tutoring sessions and a date will be given for the tutee to respond stating his/her intentions to continue to receive tutoring services. (*Emergencies will be dealt with in a case-by-case basis.*)
8. Notify the Academic Skills Advisor and/or Project Director before classes are dropped. Your tutor must be notified in order that they do not show up for tutoring and you have dropped your course(s).

I have read the above statements and agree to Student Support Services' terms.

Signature

Date

Date(s) Missed: _____

James Sprunt Community College
Student Support Services

PERMISSION FORM FOR TUTEES

I, _____, hereby give permission to the tutors, readers
Student's name
and/or note-takers of James Sprunt Community College to view and use my
phone number and class schedule in order to confirm tutoring schedules for the
class(es) in which I have requested tutorial services.

Signature

Date

Academic Skills Advisor

Initial

SSS STUDENT REFERRAL FORM

** Please complete this referral form and return to the Student Support Services Program at James Sprunt Community College.*

DATE: _____

STUDENT: _____ COURSE: _____

INSTRUCTOR'S SIGNATURE: _____

CHECK ALL THAT APPLY:

- _____ The student attends class regularly.
- _____ The student is on time for class.
- _____ The student submits homework, reports and/or projects on time.
- _____ The student participates in class.
- _____ The student demonstrates a positive attitude toward the course.
- _____ The student appears to be having personal problems.

THE STUDENT WOULD BENEFIT FROM THE FOLLOWING TYPES OF ASSISTANCE:

- | | |
|----------------------------------|-------------------------------------|
| _____ Note Taking Techniques | _____ Tutoring |
| _____ Time Management Techniques | _____ Computer Assisted Instruction |
| _____ Test Taking Techniques | _____ Assisted Lab |
| _____ Counseling | _____ Transfer Information |
| _____ Reader Services | _____ Interpreter |
| _____ Other: _____ | |

WHAT IS THE GRADE OF THE STUDENT AT THIS TIME? _____

PLEASE SHARE ANY ADDITIONAL INFORMATION OR COMMENTS THAT WOULD HELP THIS STUDENT IMPROVE IN THIS COURSE.

OFFICE USE ONLY – DO NOT COMPLETE BELOW THIS LINE:

_____ Student is not eligible for the Student Support Services Program.
Student has been referred to the following department and/or agency:

_____ JSCC Student Services –Counseling and Testing/Transfer
_____ Other (example – Academic Support Center) _____

_____ Date forwarded referral to above listed department/agency

SSS Staff Signature

Date