

Name: \_\_\_\_\_

Grade: \_\_\_\_\_

English Teacher \_\_\_\_\_

If you are interested in participating in the **NHS Peer-Tutoring Program**, please complete and return the following to Mrs. Dutch's room 200 by \_\_\_\_\_.

Please list the classes you for which you would be comfortable tutoring a fellow student. List the classes you feel comfortable with under the appropriate category below. Do not feel as though you must have a class for each category.

NOTE: You will be assigned only one tutee no matter how many classes you list, unless you choose to help more than one person per semester.

**Math** \_\_\_\_\_

\_\_\_\_\_

**English** \_\_\_\_\_

\_\_\_\_\_

**History** \_\_\_\_\_

\_\_\_\_\_

**Science** \_\_\_\_\_

\_\_\_\_\_

**Language** \_\_\_\_\_

\_\_\_\_\_

Times and Dates Available	Monday	Tuesday	Wednesday	Thursday	Friday
7:35 a.m.					
Lunch A					
Lunch B					
After School					

- **Mark ALL days and times that you would be available and willing to meet for a tutoring session.**
- **If you choose after school PLEASE specify what time.**