

Volunteer Tutor Program, Cowichan Campus

TUTOR REQUEST FORM

PLEASE NOTE: Dan Vaillancourt, Volunteer Tutor Coordinator, is available in Student Affairs.

You must be a registered VIU student to receive tutoring from the Volunteer Tutor Program.

NAME: _____ STUDENT #: _____

PREFERRED PHONE: _____ ALTERNATE PHONE: _____

EMAIL: _____

SUBJECT: _____ INSTRUCTOR(S): _____

SUBJECT: _____ INSTRUCTOR(S): _____

REASON FOR REQUEST:	
BACKGROUND IN THIS SUBJECT:	
GOALS:	
SPECIAL CONSIDERATIONS:	

TIMES YOU ARE AVAILABLE FOR TUTORING (please note actual hours and days of the week):

MORNING: _____ AFTERNOON: _____ EVENING: _____

I hereby give permission for the Coordinator to discuss my tutoring needs, situation, and progress with my tutor(s).

Student signature: _____ Date: _____

**PLEASE SIGN AND RETURN THIS FORM TO:
Dan Vaillancourt, Coordinator of Volunteer Programs, Student Affairs.**

Tutor: _____ Start: _____

Phone: _____ End: _____