

Student Resource Center Tutor Agreement Form LHS 2018-19

I recognize that I am helping a fellow student on behalf of The Lutheran High School of Kansas City. I am volunteering as an unpaid tutor as a community service for The Lutheran High School of Kansas City and/or the Calvary Elementary School. I recognize and affirm the following:

1. I enter this agreement with the purpose of wanting to help other students learn to the best of their abilities. _____ (*initials*)
2. I will greet the student whom I have been requested to tutor with kindness. _____
3. I will arrive at the Student Resource Center at the end of the school day, no later than 3:15. _____
4. I will be prepared to tutor from 3:15 until 4:15 pm. I understand that sometimes a peer may be running a bit late. I will wait for 15 minutes. If the LHS student has not arrived by 3:30, then I will be allowed to leave the SRC for that session but still be credited an hour of tutoring time as I had committed my time as a tutor. If I am tutoring a Calvary elementary student, I will check-in at the SRC and then go to the Calvary cafeteria under the co-supervision of the Calvary facilitator and then tutor that child. At the end of the tutoring session, I will return to the SRC to record my time. _____
5. I will work with my student respectfully; asking questions, prompting for responses, listening well, and asking for clarification. I will not provide direct answers or do the homework assignments for the student. My goal is to assist my student in their own learning, give appropriate guidance when studying for quizzes and tests, and help with organizational skills. _____
6. I will be responsible for logging my tutoring hours. A notebook will be in the SRC to assist with this task; however, it is my job to track my hours and then obtain the supervising adult's signature if needed for Service for the Lord hours for LHS and/or MO A+ program.
7. I will seek the guidance of the SRC facilitators if my student has a pattern of being absent or other problems develop. _____

LHS Student Name

Print: _____

Signature: _____

Date: _____

Parent/Guardian Name

Print: _____

Signature: _____

Date: _____

Recommended by Teacher

"I certify that this student is in good academic standing and has my recommendation to assist in the Student Resource Center as a tutor."

Print: _____

Signature: _____

Date: _____

Approved for tutoring by Mrs. Hathhorn/Mrs. Meier

Signature: _____

Date: _____

Student Resource Center
Located: LHS library/Calvary Cafeteria
Days: Mondays, Tuesdays, Thursdays.
Time: After school until 4:15 pm