

Student Information Form

Student Information

Student's Name: _____ Date of Birth: _____

Home Address _____

Student's Home Phone: _____ Cell Phone: _____

Mother's Name: _____ Father's Name: _____

Mother's Cell Phone: _____ Father's Cell Phone: _____

Family Email Address: _____

School Information:

Current Grade in School: _____ School Attending: _____

Current Math Course: _____ Period student has Math: _____
(Please indicate course and level such as grade level (CP), honors, etc.)

Math Teacher's Name: _____

Does the student have special accommodations, such as extra testing time, through an IEP, etc.?
If so, please describe accommodations:

If there is anything else you would like me to know about your child, please write it on the back of this form.

I understand that tutoring is most successful when the student is willing to put forth effort to improve. I also understand that my child has committed to a scheduled tutoring session, payable following each session at a rate of \$60 per hour, with 24 hour notice required if cancellation becomes necessary. *If an appointment is cancelled within 24 hours of the student's appointment, a \$30 fee will result.*

Parent's Signature _____

Student's Signature _____