SAVANNAH TECHNICAL COLLEGE

LEARNING ENRICHMENT CENTER (LEC)

TUTOR INFORMATION SHEET

Today's Date_____/_____/_____

QUARTER (Circle One) Fall Winter Spring Summer Year _____

Name: _____
Last First MI

Address _____
Street City State Zip

Home phone _____ Daytime phone _____

Cell phone _____Email address _____

Please check the subject(s) you are qualified to tutor:

____ English ____ Reading ____ Writing ____ Math ____ Other:_____

Please indicate with and "X" the time period(s) you will be able to tutor students for this quarter.

Time Period	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
8:00 – 9:00 am						
9:00 – 10:00						
10:00 – 11:00						
11:00 – 12:00						
12:00 – 1:00 pm						
1:00 – 2:00						
2:00 – 3:00						
3:00 – 4:00						
4:00 – 5:00						
5:00 – 6:00						
6:00 – 7:00						
7:00 – 8:00						
8:00 – 9:00						

_____ Date_____
Tutor's Signature