

Fill out this form and return it to Lorna Scott, Dean's Office

## TUTOR-TUTEE CONTRACT

Date: \_\_\_\_\_ Semester: \_\_\_\_\_

Tutor's Name: \_\_\_\_\_ Wes. ID: \_\_\_\_\_

Class year (or specify if Grad student, Visiting International): \_\_\_\_\_

Wes Box: \_\_\_\_\_ Phone number: \_\_\_\_\_

E-mail: \_\_\_\_\_ Major: \_\_\_\_\_

\*\*\*\*\*

Name of student being tutored: \_\_\_\_\_

Department, Course Number, Title and Instructor: \_\_\_\_\_

\_\_\_\_\_

Class Year: \_\_\_\_\_ Wes. ID: \_\_\_\_\_ Wes Box: \_\_\_\_\_

Phone number: \_\_\_\_\_ E-mail: \_\_\_\_\_

\*\*\*\*\*

*By signing this contract, I agree that I have read and understand my responsibilities as described in the Guidelines for Tutors and Guidelines for Students, as they apply to me. Additionally, as a tutor, I am responsible for turning in my hours spent tutoring the above student. I will turn in my hours via email on a weekly basis. I will email the hours I have worked each week to [lscott@wesleyan.edu](mailto:lscott@wesleyan.edu) by NOON each Friday.*

Signature of Tutor: \_\_\_\_\_ date: \_\_\_\_\_

Signature of Student being tutored: \_\_\_\_\_ date: \_\_\_\_\_