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: _______________________

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Name of student being tutored: _____________________________________________

Department, Course Number, Title and Instructor: ____________________________

_____________________________________________________________________________

Class Year: ___________   Wes. ID: ________________   Wes Box: ________________

Phone number: _______________________   E-mail: ____________________________

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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 by NOON each Friday.

Signature of Tutor: ___________________   date: __________________

Signature of Student being tutored: ___________________   date: _______________