

Perry Middle School Application for Peer
Tutoring/Study Sessions



Name: _____

Date: _____ Grade: _____ Homeroom: _____

I need assistance in the following subjects:

_____ Reading/L.A. _____ Science

_____ Math _____ S.S.

_____ Homework/Studying

When: **Thursdays 3:00-4:00 (parent
pickup in front office area)**

Where: **Media Center or designated classroom**

Why: **To make better grades**

Once your child is part of the tutoring program, notice will be given to the student for any cancellations that may arise during the year.

If you have any questions or concerns, please contact Kristi Hess, counselor, at 988-6285 X 22289. Please sign below indicating permission for your child to participate. Thank you for your assistance!

Parent's Signature

Student's Signature

