

**Academic Services for IPFW University Athletics
TUTORIAL SERVICES REQUEST FORM**

All tutorial sessions must be approved in advance by the Academic Advisor for Athletics, in Kettler 108C

Date Requested _____

Name: _____
 Print

SSN _____

Sport: _____

Phone _____

Class in which you need tutoring _____

List the days and times you are available to be tutored below.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday

Please give a brief description of the difficulties you are having in the course.

Student signature: _____ Date: ___/___/_____

Please request tutorial services at least one week in advance. If you miss a tutoring session, you will be financially responsible for one hour of pay to the tutor. Tutors will only be provided if the student is attending class regularly, and is turning homework in on time. This will be verified by contact with your professor.

Tutor assigned _____ Date ___/___/_____

Time/days of sessions _____

Athletic Department Signature: _____