

Student Engagement's Tutorial Lab

Coahoma Community College

Student Contract

Please print all information in ink (blue or black)

Name: _____ Student I.D. Number _____ Date: ____/____/____

Home Telephone: _____ Alt. Telephone _____

Email Address: _____

List the subject(s) you need to be tutored _____

What is your major? _____

Are you an athlete, band member, or choir member? Please circle all that applies to you.

Athlete **Band Member** **Choir Member**

I agree to fulfill the following responsibilities during the duration of this contract:

1. Work with the tutor to make sure that he or she understands my concerns.
2. Attend all scheduled sessions.
3. Attend all sessions on time.
4. Contact the tutor or Tutoring Office at least 24 hours in advance if it is impossible to attend a scheduled session.
5. Come prepared to all tutoring sessions.
 - a. Attempt all teacher and tutor assigned work to the best of my ability.
 - b. Accept responsibility for my learning.
6. Recognize that the "Tutor cannot perform miracles".

I understand that the tutor has similar responsibilities and that my tutoring information may be reported to my instructor and administrative personnel.

Please place an "X" in the boxes below to indicate your classes, work, and extracurricular activities