

NMC Tutoring Services

Application to Receive Tutoring Services

Date of Application: _____ Gender: ___ Male ___ Female

Name: _____ Student ID: _____
(Last) (First) (MI)

Current Address: _____
(Street/P.O. Box) (City) (State) (Zip)

E-mail: _____ Home Phone:() _____ Cell:() _____

What is your major? _____

Who is your academic advisor? _____

Have you reviewed your academic plan with a counselor/advisor in the last year? ___ YES ___ NO

Who referred you to the Tutoring program? _____

Ethnicity (check all that apply): ___ Caucasian ___ American Indian/Alaskan Native
___ African/American ___ Native Hawaiian/Other Pacific Islander
___ Hispanic/Latino ___ Asian _____ Other (please state)

Are you a U.S. citizen? ___ YES ___ NO If NO, are you a resident alien? ___ YES ___ NO

Requesting tutoring for which class(es)? Instructor(s)?

Did you receive tutoring last semester? ___ YES ___ NO

Please briefly describe your academic problem: _____

Have you discussed these concerns with your instructor? ___ YES ___ NO

Demographics:--Check all that apply:

Documented Disabled Limited English proficient (English is your second language)

Displaced Homemaker (primary homemaker/now entering the work force)

Single parent/unmarried pregnant woman

What are your financial resources for tuition at NMC? Mark all that apply:

Pell Grant Loan Michigan Works Voc Rehab

Scholarship Veteran (GI Bill) TIP (Tuition Incentive Program)

What is your academic goal at this time?

Do you plan to transfer to another institution?

Certificate

No, I do not plan to transfer

Associate of Art & Science

Yes, to a 4-year school after NMC graduation

Associate of Applied Science

Undecided

Associate of General Studies

Authorization for Release of Information

I understand that the Tutorial Program Manager will have access to my NMC transcripts, grades, academic progress, attendance and placement scores to evaluate what services may be necessary. I understand that the Tutorial Program Manager may discuss any academic problems that I have with my tutor and/or instructor in order to improve my tutorial experience. **I also understand that my status in the program can be terminated after 3 unexcused absences.**

Student Signature: _____ Date: _____

Place an **X** in the boxes that you are **AVAILABLE** to meet with a tutor. Understand that the more times you give us to work with, the better your chances that we **DO** in fact have a tutor available within your schedule. ***Our office is open M-F 8a.m.-5p.m.***

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8:00 am					
9:00 am					
10:00 am					
11:00 am					
12:00 pm					
1:00 pm					
2:00 pm					
3:00 pm					
4:00 pm					

Office use only:

Sessions held:

Tutor:

Days:

Time:

Starts: