

BILINGUAL TUTOR REQUEST FORM

FALL_____SPRING_____YEAR_____

STUDENT NAME: _____

GRADE LEVEL:

Please obtain the three signatures in the area below. Remember, you can only be a Bilingual Tutor for two semesters, and you must be a junior or senior to qualify.

has my permission to be a Bilingual Tutor during the _____ period. In case he/she has a schedule conflict with this period, please change it to period(s)

Teacher Signature

(Please remember each teacher may have only one Bilingual Tutor per period.)

Registrar