



## Confirmation of Authorized Tutoring Hours

Date:

Tutor of Record:

### Student Tutoring Information:

Student's name:

Grade:

School/District:

Contact at School:

Phone:

Rate per hour:

Is tutor responsible for grading?

Grades are due on the following dates:

Tutor is responsible for teaching the student named above the following courses:

The student named above is authorized for tutoring from \_\_\_\_\_ until \_\_\_\_\_

This student should receive \_\_\_\_\_ Hours of tutoring

### Student Contact Information:

Parent/Guardian name:

Home Phone:

Cell Phone:

Work Phone:

Address:

City:

Zip:

I, \_\_\_\_\_ Understand that the above student may not receive more hours of instruction than the authorized number of hours as stated above. I realize that I will not be compensated for hours that are not authorized unless I receive written permission from the Tree of Knowledge Learning Academy Staff.

Tutor Signature:

Date:

Tutor will not receive payment until contract is signed.

TOKLA Staff Signature:

Date:

TOKLA Staff Printed Name:

Date: