

STRIVE Counselor: \_\_\_\_\_



## Learning Coach and Tutor Request Form

Please be aware priority will be given to new students, students with disabilities, students referred by counselors, and date request was submitted.

Fall     Spring    Year: \_\_\_\_\_

**Please Print Clearly**

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Main Phone #: \_\_\_\_\_ Student ID#: \_\_\_\_\_

Would you like to receive weekly reminder calls of your scheduled appointment?

YES     NO

**Please Indicate First, Second, and Third choice by priority with 1, 2, 3:**

Math Tutor \_\_\_\_\_ Learning Coach \_\_\_\_\_ Writing \_\_\_\_\_

**I need support with the following study skills:**

\_\_ Note Taking    \_\_ Organization    \_\_ Research Papers    \_\_ Time Management  
\_\_ Test Anxiety    \_\_ Test Taking    \_\_ Study Strategies    \_\_ Memory Strategies  
\_\_ Math Anxiety    \_\_ Presentation    \_\_ Reading Textbooks    \_\_ Writing/Grammar

Other concerns: \_\_\_\_\_

**Please list the classes you are currently enrolled in this semester:**


**Please fill out your available time schedule on the back of this form → → →**

Please cross off ALL the times you are unavailable to meet with a Learning Coach or Math/Writing Tutor:

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>	
<b>9:00 a.m.</b>						<b>9:00 a.m.</b>
<b>10:00 a.m.</b>						<b>10:00 a.m.</b>
<b>11:00 a.m.</b>						<b>11:00 a.m.</b>
<b>12:00 p.m.</b>						<b>12:00 p.m.</b>
<b>1:00 p.m.</b>						<b>1:00 p.m.</b>
<b>2:00 p.m.</b>						<b>2:00 p.m.</b>
<b>3:00 p.m.</b>						<b>3:00 p.m.</b>
<b>4:00 p.m.</b>						<b>4:00 p.m.</b>
<b>5:00 p.m.</b>						<b>5:00 p.m.</b>