

Lawrenceville First Baptist Church

TUTORING MINISTRY

Student Information for 2018-2017

Student Name _____ Grade (circle one): 1 2 3 4 5

School attending _____ Teacher _____

Check one: Male _____ Female _____ Date of Birth _____

Primary Language spoken at home _____ Other languages: _____

Name of parent/guardian _____

Home address _____

Home phone number _____ E-mail _____

Additional phone number (work, pager, cell, etc.) _____

Name of spouse/parent/non-parent – All adults authorized to pick-up student:

NAME

TELEPHONE

Specify any grade repeated (circle all that apply) K R 1 2 3 4 5

Does your child have access to the internet at home via laptop, tablet or smart phone? Yes or No

Identified areas of learning needs (to discuss with tutor):

Grades per last report card (attach a copy if available):

Reading: _____

Math: _____

Spelling: _____

Science: _____

Social Studies: _____

Writing/Grammar: _____

Does your child receive additional services at their school? Check any that apply.

ELL (English Language Learner)
 Speech
 Other (please explain below):

Special Education
 Self-contained
 Collaborative Teacher

Anything else we need to know about your child:

In the event of an emergency and the parent/guardian cannot be reached, please list an emergency contact:

Name _____ Telephone _____

Relationship to student _____

Please initial in front of each paragraph for approval, then sign and date below.

_____ I give my permission for _____ (Student's Name) to attend the tutoring program at Lawrenceville First Baptist Church. I understand that it is a community ministry of the church and that it is not required by my child's school. I know that the Bible or Bible-related content may be used on some occasions in teaching reading and writing, that Bible verses will be used for memorization practice, and that tutoring sessions will end with prayer or Bible stories.

_____ I give my permission for _____ (Student's Name) to be photographed at tutoring activities, and that these photos will be used solely for the purpose of the church's website or videos for publicizing of this ministry; no names or other identifying information will be disclosed.

_____ I understand that if my child misses more than two (2) sessions in a row without notification to the ministry coordinator, they will be taken off the roster so that the tutor can be assigned a student on our waiting list.

_____ I understand that completion of this application does not guarantee that my child will be enrolled in the tutoring process. It will be dependent upon tutor availability and student's needs.

Signature of parent/guardian

Date