



**2013-2014 STUDY FRIENDS TUTORING PROGRAM
REFERRAL FORM**

THIS PAGE MUST BE COMPLETED BY THE PARENT

Date: _____ Student Name: _____

Student's Date of Birth: _____ **Student's Ethnicity:** _____ **Student's 1st Language:** _____

Student's School: _____ **Grade:** _____ **Gender: M F**

Parent's Name: _____ Cell Phone # _____

Physical Address: _____ City _____

Mailing Address: _____ City _____ State ___ Zip Code _____

Home Phone #: _____ Email Address: _____

Emergency Contact Name: _____ Phone Number: _____

Does this student have any learning differences? _____ Does he/she have an IEP? _____

Powerschool ID: _____ Powerschool Password: _____ (If you do not know your Powerschool ID and password, please check with your child's school and bring password and ID to your match meeting)

WHERE AND WHEN: Please let us know where you would be willing to bring your child for tutoring. Please note that the Gypsum Library closes at 6pm, Tues - Fri.

Please mark any times the student can meet	Mon	Tues	Wed	Thurs	Fri
4-6 pm					
6-8 pm					X

Eagle Library

Gypsum Library

Student is also enrolled in: SOS Youth Foundation Walking Mountain/ GRNSS
(Circle all programs in which your child has participated in the last year)

Please return this form to your child's teacher or the school office

If you have questions, please contact: Kira Chaney Barclay, Study Friends Program Coordinator
Gypsum Library: 970-524-5080 Eagle Library: 970-328-8800 kiraliteracy@evld.org

www.literacyprojecteaglecounty.org



THE LITERACY PROJECT

Read Well Speak Well Live Well

2013-2014 STUDY FRIENDS TUTORING PROGRAM - TEACHER REFERRAL FORM
THIS PAGE MUST BE COMPLETED BY THE REFERRING TEACHER

Date: _____ Student Name: _____

Referring Teacher's Name (Please Print): _____

Referring Teacher's Phone #: _____ Email: _____

Reason(s) for Referral: _____

Can the tutor contact you? YES NO Can you meet with the tutor and student? YES NO

Current Grade in Math: A B C D F

Current Grade in English: A B C D F

Current Grade in History: A B C D F

Current Grade in Science: A B C D F

How would you assess his/her study skills?

0	1	2	3	4	5	6	7	8	9	10
Poor									Excellent	

How would you assess his/her classroom participation?

0	1	2	3	4	5	6	7	8	9	10
Poor									Excellent	

How would you assess his/her attendance?

0	1	2	3	4	5	6	7	8	9	10
Poor									Excellent	

How would you assess his/her self-esteem?

0	1	2	3	4	5	6	7	8	9	10
Poor									Excellent	

How would you assess his/her organization?

0	1	2	3	4	5	6	7	8	9	10
Poor									Excellent	

Referring Teacher's Signature: _____