



YOUTH AND FAMILY SERVICES

250 South Route 59, Bartlett, IL. 60103 / (630) 483-5799 / www.hanover-township.org

2009 – 2010 TUTORING SERVICES October 5, 2009 to January 11, 2010 Directions for Application Form

DIRECTIONS:

- Please complete and print the application form.
- All Tutoring Application Forms must be completely filled in by:
Section A parents/guardians / Section B student's teacher
- Please mail* (or drop off) completed and signed application (Section A and B) to:
Hanover Township
Youth and Family Services
Attn: Sara Concepcion
250 South Route 59
Bartlett, IL 60103-1648
- For additional information call (630) 483-5799.

* Please do not mail in fee with application/fee will be collected during orientation.

Hanover Township Youth and Family Services is pleased to offer you a tutoring program to help your child increase their academic skills. Three certified teachers will provide one weekly, one-hour small group tutoring sessions on Monday and Thursday evenings, at 5:00, 6:00, or 7:00 PM for students who can read and work independently in a small group for one hour. Tutoring will take place at the Township Offices, 250 South Route 59, in Bartlett, IL.

ELIGIBILITY AND REQUIREMENTS:

To be eligible, your child must meet the following criteria and a parent or guardian must sign and return this completed form.

1. Student must live in Hanover Township (the *Cook County portion* of Bartlett, Streamwood, Hanover Park, Elgin, Schaumburg, or Hoffman Estates) and must currently be in Grades 2 through 9. ***Out-of-Township residents, please call (630) 483-5799 for more information.***
2. All parents/guardians must remain in the building during the Tutoring Sessions.
3. A \$35.00 fee per semester/per student is due at the orientation. Please return your application form (Section A & B) by **Friday, September 18, 2009** to be guaranteed a slot at the beginning of the semester. Tutoring slots will be filled on a first come first served basis.
4. All students must bring his or her own school materials and assignments to Tutoring Sessions.

Space is limited to 60 students

Upon completion of orientation, tutoring application, and receipt of fee, your child/children will be assigned a tutoring time.



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TUTORING SERVICES APPLICATION FORM

Section A

Previous Tutoring: Yes No Sex: M F Date: _____

Student's Name: _____ Birthday: _____

Address: _____ School: _____

Town, State, Zip: _____ Parent's Work Phone: _____

Home Phone: _____ Grade: _____

Cell Phone: _____ *E-mail Address: _____

PARENT/GUARDIAN CONSENT, AUTHORIZATION FOR RELEASE OF INFORMATION, AND AGREEMENT

I, _____ (parent/guardian name), give consent for my child to receive tutoring services from a certified teacher through Hanover Township Youth and Family Services. I authorize the teacher-tutor and my child's school teacher to exchange information about my child's academic progress for the purpose of planning and coordinating the tutoring plan.

As a condition for my child to receive tutoring services, I agree to remain in the Township building during my child's tutoring sessions.

Registering for Tutoring Services gives Hanover Township Youth and Family Services the authorization to use photos and videos for promotional purposes.

Parent/Guardian Signature _____ Date: _____

Section B (for teachers only)

Teacher's Name: _____

Signature: _____

School Name: _____

Address: _____

E-Mail Address* _____ Phone #: _____

Specific subject area(s) in need of tutoring: _____

Specific skill(s) in need of tutoring: _____

Any special services/resources provided to the student by the school: _____

*EMAIL ADDRESS WILL BE USED TO SEND ADDITIONAL INFORMATION WHEN APPLICABLE