

# Tutoring Form Fall 2025-Spring 2026

Bring this completed form to room 1256 before or after school ONLY. **NO SIBLINGS!!!**

## TO BE FILLED OUT BY NSHS STUDENT:

Dear Sra. Kohlmaier,

I, \_\_\_\_\_, tutored \_\_\_\_\_ for one hour on (DATE) \_\_\_\_\_.

Level \_\_\_\_ Teacher of Student \_\_\_\_\_ / School \_\_\_\_\_

Topic Studied: \_\_\_\_\_

**What skills were practiced?:**

**How did you help the student? What did you use?:**

**What did you learn?:**

## TO BE FILLED OUT BY PARENT/ADULT WITNESS

Parent Name: \_\_\_\_\_  
\_\_\_\_\_

Parent Number:

Parent Email: \_\_\_\_\_  
possible): \_\_\_\_\_

Parent Signature (if