Rev. 1-21-15

Tutor Documentation Form

Tutor: _____

School: _____

Student: _____

Student Grade: _____

Subject Area(s)

- ☐ Language Arts
- ☐ Mathematics
- ☐ Science
- ☐ Social Studies
- ☐ Foreign Language
- ☐ Other (specify below)

_____

Student need(s) and goals addressed through tutoring services:

_____

_____

_____

_____

_____

Date	**Corresponding Time**	**Specific work completed during tutoring services**	**Goal Met Yes/No**	**Assessment tool utilized to determine the specific skill(s) that was met or not met** *I.E. Reading prompts with success rates, frequently corrected usage of math algorithm, quiz, tests, on the spot assessments.*