

FAMILY Resource Center

Tutoring Registration 2017 – 2018
Call 774-1103 to Schedule Tutoring Sessions

Date: _____

Student Information

Student Name: _____ Date of Birth: _____

Address: _____

School: _____ Grade: _____ Gender: Male Female

Allergies or any Medical Conditions: _____

Days student will be in attendance:

Monday _____ Tuesday _____ Wednesday _____ Thursday _____

Time:

K-5 3:45p.m. – 4:30p.m. OR 4:30p.m. – 5:15p.m.

6-12 3:15p.m. – 4:15p.m. OR 4:15p.m. – 5:15p.m.

Parent/Guardian Information

Name: _____ Relationship to student: _____

Daytime Phone: _____ Home Phone: _____

Cell Phone: _____ Email: _____

Name: _____ Relationship to student: _____

Daytime Phone: _____ Home Phone: _____

Cell Phone: _____ Email: _____

Emergency Contact Information

I authorize the following individuals to collect my child from the facility in case of emergency or if I cannot be contacted:

Name: _____ Contact Telephone Number: _____

Name: _____ Contact Telephone Number: _____

Name: _____ Contact Telephone Number: _____



Parent/Guardian Agreement 2017-2018



Student Name: _____

My signature below indicates that I permit my child named on this form to participate in tutoring provided by FUSD. I understand and agree to the following:

- + **Elementary students (K-5) need to be signed out by an authorized person.** Please initial: _____
- + Middle School and High School students may sign themselves out.
- + My student must be picked up at the conclusion of their tutoring session. Extended supervision is not provided.
- + If I am **more than 30 minutes late** and no one from my emergency contact list can be reached, law enforcement officials may be called to pick up my child.
- + If my student will miss tutoring, I will contact the Family Resource Center (FRC) to inform staff of my student's absence. Excessive absenteeism may result in my child losing their tutoring spot to a student on the wait list.
- + Tutoring occurs in a small group setting with certified FUSD teachers. **One-on-one appointments are not available.**
- + My child's behavior may result in suspension or expulsion at the discretion of the FRC Coordinator and Educational Enrichment Director.
- + Anyone picking up my child from tutoring, including myself, may be **required to show photo ID** to any tutoring staff upon request.
- + During the course of the school year, staff may take photos or videos of students. These may be used by the Family Resource Center, in parent and community materials, videos, and Facebook posts. I may decline the use of my child's image by contacting the FRC for the appropriate opt-out form.
- + Families are encouraged to use the FRC's computers, books, games and toys while waiting for their student's tutoring session to complete. Young children must be supervised and kept quiet in the tutoring area.
- + I must inform the FRC staff of any changes to information provided on the registration form.
- + In the event of a medical emergency, I authorize FRC staff to arrange for any necessary medical care for my child.

Parent/Guardian Name (Please Print)

Parent/Guardian Signature

Date