



School Use Only:	
Date rec'd:	_____
Time rec'd:	_____
Teacher:	_____
ID#	_____
Provider Assigned:	_____

# Registration Form

I am applying for FREE Tutoring for my child listed below:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Teacher Name: \_\_\_\_\_ Child receives Free or Reduced lunch? YES \_\_\_ NO \_\_\_

- Parents must transport their children to receive services as the school will not be providing transportation to or from tutoring sites. Locations will be provided by the provider at a later date.
- Information about SES Providers is on the back of this form.
- Mark your 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> choice of Provider:  
Providers will be assigned on basis of student need and number of spaces available.

CHOICE	PROVIDER	CHOICE	PROVIDER
	A to Z In-Home Tutoring		EDUSS Learning*
	A+ Learning Solutions		Eduwizards Inc
	A Tree of Knowledge		Innovadia
	Ala Carte Learning		Inspired Solutions*
	Abacus In-Home Tutoring		John Corcoran Foundation
	Adventures in Learning		Keep Hope Alive Projects
	ATS Project Success		Learn-It Systems
	Babbage Net School		L.I.F.E. Centered Training
	Brainfuse One-on-One Online		My Success! Tutoring
	Brilliance Academy of Math and English		Right On Learning
	Chancellor Supplemental Educational Services, LLC		School Technology Extensions
	Club Z! In-Home Tutoring Service		Smartkids Academy Inc.
	Dreamcatcher Direct Instruction Center		Summit Learning Services
	Educate Online		TCY Learning Solutions
	Educational Services of America, Inc.		The Tutors and Virtual Campus

\* These companies will be providing services at the school

Parent Contact Information: (please print clearly)

Parent or Guardian Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Number(s): home: \_\_\_\_\_ work: \_\_\_\_\_ cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

The contact information you have provided above will be shared with your child's approved FREE tutoring provider for communication with you. The tutor will use this information to contact you regarding your child's FREE tutoring services only.

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_

(Signature provides consent of participation and release of student information to SES Provider)