

# MIFFLIN COUNTY SCHOOL DISTRICT

201 Eighth Street - Highland Park

Lewistown, Pennsylvania 17044

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David S. Runk, Superintendent

Dr. John J. Czerniakowski, Assistant Superintendent

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Mark K. Hidlay, Director of Student Support Services

Tracey M. Jones, Director of Special Education

Mary Lou M. Sigler, Director of Federal Programs

James S. Weaver, Jr., Business Manager

## TUTORING AGREEMENT – 2007-08 School Year

Please print all information except parent signature.

Name of Student \_\_\_\_\_ Grade \_\_\_\_\_

My child will attend the After School Tutoring Program beginning September 25, 2007, and ending November 15, 2007. I understand that the school expects regular attendance and that qualified teachers will tutor my child when he/she attends. **This program is on Tuesdays, Wednesdays and Thursdays from 3:15-4:30 PM.**

I understand that no transportation will be provided and that I must pick up my child on time in order to participate in the program. This program is at **Indian Valley Middle School.**

I understand that assessments may be given to check my child's progress and that the teachers working with my child will inform me of his/her progress periodically.

Parent's \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home \_\_\_\_\_ Telephone \_\_\_\_\_

Emergency \_\_\_\_\_ Contact's \_\_\_\_\_ Name \_\_\_\_\_

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Phone

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Information \_\_\_\_\_ teachers \_\_\_\_\_ should  
know \_\_\_\_\_

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Parent's \_\_\_\_\_ Signature \_\_\_\_\_  
Date \_\_\_\_\_

**Return this form to: Mrs. Shepherd, Mrs. Stauffer, or Mrs. Wray by  
September 21, 2007.**