

Higher Education Tutoring Application 2023 - 2024 School Year

Member #:	
Date:	

Submit application here: Tutoring@semtribe.com

If you have any questions, please contact your local Education Office below or Tutoring Program Supervisor Jan Bishop (954) 989-6840 Ext. 10589



SEMINOLE TRIBE OF FLORIDA

The Education Department Higher Education Tutoring Application School Year 2023-2024

Student Information (Please Print)

Student's Name:		Member ID#:		
Phone#: Ema	ail Address: _			
Address:				
City:		State:	Zip Code:	
Date of Birth	Age			
Emergency Contact Information				
Full Name		Phone #		
Relationship to Student				
Education Information				
Name of School:		Classification:		
School Start Date:				
Academic course(s) in which student needs (Tutoring is only provided for Developmental or General		vel 100 courses)		
1)		2)		
Tutoring Location (Virtual or In-Person):				
EDUCATION DEPARTMENT DOES NOT PAY FOR U	NEXCUSED ABS	SENCES NOR HOURS THAT HAVI	E NOT BEEN APPROVED.	
Signature Required				
Signature of Requestor:		Date:		



SEMINOLE TRIBE OF FLORIDA

The Education Department

Higher Education Tutoring School Year 2023-2024

Student Print Name:

2023-		ar. Please read and sig	you have decided to take advan at the bottom, and you are a					
1.	. I agree that attendance is important to reaching mastery and making academic gains, so I will attend all tutoring sessions on time and ready to learn.							
2.	. Tribal member students qualify for four (4) hours of tutoring. Additional unapproved hours will be billed directly to the parent/guardian or student.							
3.	Attendance is key to success; therefore, students must attend all scheduled tutoring sessions.							
4.	4. Students or parents MUST contact the tutor or tutoring company directly with any cancellations or attendance matters within two (2) hours prior to the scheduled session. (Please note , calling the Education Department does not suffice for proper cancellation).							
5.		Department reserves the used absences (No Shown	ne right to withdraw the enrollmw).	ent of a student who accu	mulates more that			
6.	Students who own tutoring h		of age and older will be respons	ible for reviewing and co	onfirming their			
Stude	nt Signature		Date					
		Edu	cation Staff Use Only (De	o not fill in)				
□ App	roved Num	ber of Hours	_					
Tutor P	rogram Superviso	or Approval:	(Signature)	Date:				
Comme	ents:		(Signature)					
Vendor	Information							
Tutorin	g Company:							
				ed:				
Locatio	n:							