



# Academic Resource & Tutoring Center

www.necc.mass.edu/tutoring/atc or 978-556-3411

Haverhill Campus, C- 210 & Lawrence Campus Library/L-200

## WELCOME TO THE ARTC!

Do you want to be a tutor?	Yes _____	No _____
Do you want to receive tutoring?	Yes _____	No _____

One-on-one tutoring is 1 hour per week and study group tutoring (2-5 students) is 2 hours per week. The tutoring arrangement is a weekly commitment. Please refer to the tutoring guidelines for more information.

Name: _____	Date: _____	
Street Address: _____	SSN: _____	
City: _____	State: _____	Zip Code: _____
Day Phone: _____	Evening Phone: _____	
Email Address: _____		
Degree/Certificate Program: _____		

**Please mark an X where you have the time to commit to be a tutor or receive tutoring on a regular basis.**

	Monday	Tuesday	Wednesday	Thursday	Friday
8:00 – 9:00 am					
9:00 – 10:00 am					
10:00 – 11:00 am					
11:00 – 12:00 noon					
12:00 – 1:00 pm					
1:00 – 2:00 pm					
2:00 – 3:00 pm					
3:00 – 4:00 pm					
4:00 – 5:00 pm					
5:00 – 6:00 pm					

Every effort will be made to match tutors and tutees though there is no guarantee. Success is based upon peer tutor availability and compatibility of schedules.

Are you in the PACE Program?	Yes _____	No _____
<b>If not, the following information will help determine if you are eligible for the PACE Program.</b>		
Did either of your parents graduate from a four-year college?	Yes _____	No _____
Are you receiving Financial Aid?	Yes _____	No _____

<b>To Get a Tutor</b>	
<b>Please have your instructor sign the referral information below before you return the application. Applications will not be processed without an instructor's signature.</b>	
Course & Instructor Name	
Instructor Signature	
Course & Instructor Name	
Instructor Signature	
Student Signature	

<b>To Be a Tutor</b>			
<b>Please indicate the subject(s) you would like to tutor. The instructor's signature verifies that he/she has had the student in his/her class and believes that he/she would be an appropriate choice as a peer tutor.</b>			
Course	Instructor Name	Grade	Semester Taken
Instructor Signature:		Date:	
Course	Instructor Name	Grade	Semester Taken
Instructor Signature:		Date:	
Course	Instructor Name	Grade	Semester Taken
Instructor Signature:		Date:	

<b>The above information is accurate and complete to the best of my knowledge. I give the ARTC Coordinator permission to request references from my instructors.</b>	
Student Signature:	Date: