SOUTH TEXAS COLLEGE

Dual Enrollment Academy Program
Tutoring Sign-In Sheet

Student's Name: _____ A#: _____

Academy:_____ **Semester: _____ Year: _____**

Instructions: Complete this form each time you attend tutoring. Have your tutor print his/her name. Fill in the time you start and finish tutoring and the total time tutored. Have your tutor initial the tutor initial column before you leave the tutoring session. When this form is full, please contact the DE Academies for a new one. These forms will be kept in your dual enrollment student records. Thank you.

Date	Tutor's Print Name	Subject	Start Time	End Time	Daily Total Hours	Tutor Initials