

**NHS Volunteer Tutoring Permission Slip (Tutors)**

Parent/Guardian Name: \_\_\_\_\_

Student Tutor Name: \_\_\_\_\_

School: \_\_\_\_\_

Grade: \_\_\_\_\_

I am available to offer tutoring in following subject(s):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I am available to offer tutoring to the following grade levels:

Middle School Students        Elementary School Students   

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I give permission for my child to participate in the volunteer tutoring program as a tutor. I understand that this means my child will either meet in person or log in to an online Google Meet with a middle school or elementary school student to provide virtual tutoring. There will be no supervision by any Nutley Public Schools staff member. The designated high school student volunteer tutor and the student will come up with meeting dates and times that work for them. This program is a volunteer program so there is no payment provided to the tutors.

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

Date: \_\_\_\_\_