



Tutoring Agreement

Student: _____

Tutor: Katherine Selma (Little Words Preschool)

Tutor Responsibilities:

- Arrive on time for each tutoring session
- Give the student a minimum of 24-hours advance notice if unable to attend the scheduled session
- Assist students in determining areas of need
- Have lessons planned in advance of each session.

Goals of Tutoring:

- Determine the areas of student difficulties
- Improve student competence in these areas
- Help students become independent learners
- Improving and building upon the student's confidence and self-esteem

These Goals Are Reached By:

- Allowing students opportunities for practice
- Reviewing assignments and assessments to determine the areas of need and strength
- Helping the student review and preview classroom material, as needed.

Student Expectations:

- Arrive on time and attend tutoring sessions as scheduled.
- Give the tutor a minimum of 24-hour advanced notice if unable to attend the session as scheduled.
- Bring both school and tutoring homework and reading materials or books
- Actively participate in each session, asking questions as needed.

Tutor Signature: _____

Date: _____

Billing Responsibilities:

- Payment: The agreed-upon payment (\$ 50 / 60 min) for each tutoring session is due in full on or before the scheduled session. Payment can be made by Cash or Cashapp
- \$littlewordspreschool
- (<http://cash.app/littlewordspreschool>)

- Additional Considerations:
- Parents are expected to commit to a minimum 4-Sessions and to pre-pay at least 1 month in advance. Parents can pre-pay up to 3 months in advance.
- All payments are final, non-negotiable and non-refundable.
 - If the student arrives late after 5 minutes, a \$1 late fee each minute.
 - 10 minutes late= \$10 or
 - 25 minutes late =\$ 25

Tutor Name (Please print): KATHERINE SELMA

Tutor Signature: _____

Date: _____

Tutor Cell Phone Number: 786-763-0505

Alternate Phone Number: 645-216-7645

Tutor E-mail Address: LITTLEWORDSPRESCHOOL@GMAIL.COM

I certify that I have read and discussed the information contained in this contract. **I understand that tutoring may be suspended or discontinued if it is determined that the student is not making an effort to benefit from such services or in the event of three “no shows” (not giving at least 24 hour notice of session cancellation)**

Parent Name (Please print): _____

Parent Signature: _____

Date: _____

