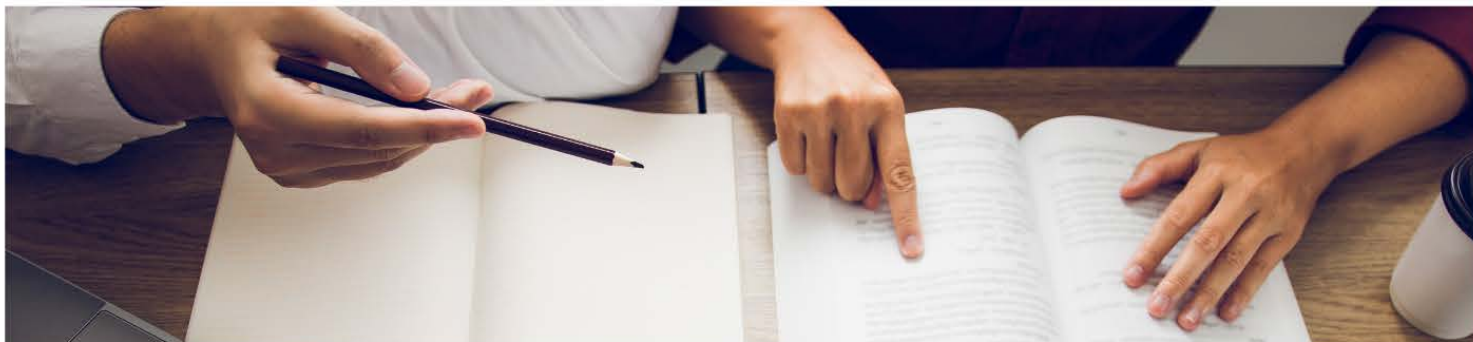


ACADEMIC SUPPORT

K-5 TUTORING

2023-2024



AANII PARENTS AND CAREGIVERS,

Your youth's academic success is very important and a priority to us here at Youth Services Waaniigaanzijik. We are excited to continue to offer your youth academic support and/or tutoring in Reading and Math with an experienced, State of Michigan K-8 certified teacher. This amazing opportunity is provided free of charge for our families through a grant at Youth Services Waaniigaanzijik.

HOW TO SIGN UP

Please complete this consent application packet (3 pages). You can return it by emailing this e-form or a picture of the form to **LWells@LtbbOdawa-nsn.gov** or drop it off in person in the Youth Services mailbox at the LTBB Government Center.

Miigwech!

Lisa Wells
Academic Support Specialist
Phone: 231.373.0870



YOUTH INFORMATION

Name: _____

Grade: _____ Age: _____

School: _____

District: _____

Teacher: _____



PARENT/CAREGIVER INFORMATION

Parent/Caregiver Name: _____

Email: _____

Cell Phone: _____

Please Choose Your Best Means of
Communication: **Email** **Text**



K-5 ACADEMIC SUPPORT & TUTORING 2023-2024

Reading & Math Academic Support Tutoring Consent and Request for Services

Limited Spaces available.

★ **Kindergarteners** applying for tutoring must be at least 6 years old.

Mon/Tues - LTBB Government Center

Wed/Thurs - Petoskey Public Library

Youth's Name: _____

Grade: _____ Age: _____ Teacher: _____ School: _____

Please check the following areas that apply:

_____ Please help with Math

_____ Please help in other area(s):

_____ Please help with Reading

_____ Please contact my youth's
teacher to find out what help
would be best for my youth.

Please Choose One of the Following:

_____ Please tutor Mon or Tues at
Harbor Springs Government
Center

_____ My youth's teacher has informed
me that my youth is below grade
level in a subject area.

_____ Please tutor Wed or Thurs at
Petoskey Public Library

Youth's PowerSchool Information (if applicable):

Access ID: _____ **Access Password:** _____

★ **To be eligible for tutoring services, a copy of your child's most recent report card must be given to Youth Services Academic Support at the beginning and end of each grading period.**

Parent/Caregiver Signature: _____ **Date:** _____



ACADEMIC SUPPORT & K-5 TUTORING

2023-2024

Consent to Release Academic Records

Pursuant to the Provisions of the **Family Educational Rights and Privacy Act**, I give my consent to authorized representatives of _____ School District/School for the release of my child's academic and attendance records. I understand that this authorization will remain in effect until I rescind it in writing. I understand that I have the right to rescind this authorization at any time.

Child's Name: _____ D.O.B. _____

Parent/Guardian Name (Printed): _____

Parent/Guardian Signature: _____

Date: _____

Information for Entity/Staff Authorized to Receive Academic Information

Little Traverse Bay Bands of Odawa Indians
Youth Services Department
Kristina Dominic - Youth Services Director
7500 Odawa Circle
Harbor Springs, MI 49740

TO BE COMPLETED BY PERSON(S) AUTHORIZED TO RECEIVE ACADEMIC INFORMATION

In accordance with the consent of the above student, I accept full responsibility for any and all information contained in the academic record that may be released to me, and agree to abide by the following procedures and provisions:

1. All requests for information will be submitted by me in writing or on a form supplied by the school. I understand that academic information may not be discussed over the telephone.
2. The parent may rescind authorization at any time.

Signature: _____

Date: _____

Youth Services Director





ACADEMIC SUPPORT & K-5 TUTORING

2023-2024

Tutoring Conditions Checklist


Please read and agree to the following conditions:

(Initial Here)  I am aware that in order to receive tutoring, my Youth must be enrolled in LTBB Waaniigaanzijik Youth Services After-school Program.

(Initial Here)  I am aware that I must provide the tutor copies of my Youth's latest report card at the beginning of tutoring services and at the end of each grading period. Report cards can be requested from your Youth's school's main office.

(Initial Here)  I am aware that, if accepted, my K-5 Youth will be scheduled for at least one 20-minute tutoring session a week.

(Initial Here)  I am aware that even if my Youth is in Kindergarten, my Youth must be at least 6 years old to be eligible for tutoring services.

(Initial Here)  I am aware that if my Youth's scheduled tutoring session has to be cancelled for any reason, my Youth might not receive tutoring that week.

(Initial Here)  I am aware that if my Youth misses multiple tutoring sessions, my Youth may lose their tutoring timeslot.

I have read and agree to the above conditions.

Parent/Guardian Signature: _____ Date: _____