

CLIENT RESPONSIBILITIES:

1. We agree that tutoring ***will not*** take the place of our own study time and we will attend class regularly.
2. We understand that our tutor cannot do our homework for us or provide answers to graded assignments.
3. We will continue to consider our professor the primary source of academic assistance.
4. We will notify our tutor (via email, text, or phone call) at least 12 hours in advance if we are unable to meet at our regular meeting time, and understand that our contract will be dissolved and will no longer be in the tutoring group if we cancel or "no show" **2 times.**
5. We understand that if we do not meet these terms that our contract will be dissolved and our tutoring spot will be opened to others.

TUTOR RESPONSIBILITIES:

1. I understand that doing my clients' homework is cheating and I will only offer guidance after they have attempted the assignment on their own. I will adhere to the UW Oshkosh integrity policy.
2. I will make sure I let my clients know (via text, email or phone call) at least 12 hours in advance of a schedule change, and will fill out a contract modification form if it is a permanent change.
3. I understand that the professor is the primary source of academic assistance and ***will encourage*** my clients to meet with him or her regularly to discuss their progress in the course.
4. I will notify CAR staff if the contract is cancelled.
5. I will complete my tutoring hours in HRS after each tutoring session.

TUTORING SCHEDULE:

_____ (day of the week) @ _____ (time of day)

Client 1 Name: _____ Client 3 Name: _____

Client Signature: _____ Client Signature: _____

Email: _____@uwosh.edu Email: _____@uwosh.edu

Client 2 Name: _____ Client 4 Name: _____

Client Signature: _____ Client Signature: _____

Email: _____@uwosh.edu Email: _____@uwosh.edu

TUTOR NAME: _____ TUTOR SIGNATURE: _____

Tutor Email Address: _____ Course Dept. & Number: _____

Instructor Name: _____ Today's Date: _____

CAR Staff Initials: _____