

1563 Fillmore Street, Unit 2-B Twin Falls, ID 83301 (208) 358-5520 www.successlearningmv.com

Please print information clearly.

Date:_____

I. STUDENT & PARENT/GUARDIAN INFORMATION

Student's Last Name:		First Name:	
Gender:	Date of Birth:		
Parent/Guardian's Nam	e:	Relationship to St	udent:
Home Address:			
Home Phone:		_ Work Phone:	
E-mail:		_ Mobile Phone:	
Best method to reach P	arent/Guardian's:		
Occupation:	Em	ployer:	
Does Student have acce	ess to a home computer/in	ternet:	
HOW DID YOU HEA	R ABOUT US?		
Referral	Internet Search	Website	Social Media

II. ACADEMIC AND TUTORING INFORMATION

School:	Grade:
Student's favorite subject(s) in school:	
Subject area(s) Student needs to work on:	
Student's hobbies and interests:	
Siblings:	
Food allergies and/or medical needs:	
What areas would you like to see the Student ir	nprove:
Is there anything else we should know about yo	our child:
Would you like Success Learning to contact an	y of the Student's teachers?YesNo
If yes, please list their names along with their c	ontact information.
Teacher's Name:	
Subject:	
Telephone Number:	
E-mail Address:	

III. SCHEDULING INFORMATION

Sessions are conducted in one hour increments. Please mark the following days and <u>include the</u> <u>times that you would prefer</u>. You will be notified as soon as the time/dates are approved and set.

Mon. Tues. Wed. Thurs. Fri. Sat.

How often do you anticipate that the Student will attend tutoring session(s):

_____1 time/week;

_____2 times/week;

_____3 times/week;

_____4 or more times/week.

THESE DAY(S)/TIME(S) ARE SUBJECT TO CHANGE AT YOUR REQUEST.

IV. TERMS AND CONDITIONS:

- 1. Tutoring hours will be charged at the rate of \$30.00/hour. Tutoring fees are due prior to the tutoring session, unless other arrangements have been made with Success Learning Center.
- 2. Tutoring fees can be paid with cash, check, debit/credit cards, Venmo or Zelle.
- 3. A signed registration form and payment for the initial tutoring session are required for services to begin. You may also contact Michelle Rudas or Scott Marshall at (208) 358-5520, or <u>Michelle@successlearningmv.com</u> for further arrangements.
- 4. All tutoring session fees shall be paid directly to Success Learning Center.
- 5. If a scheduled tutoring session is cancelled with less than 24 hours' notice, the charge will not be waived. Please give Success Learning Center notice of any cancellations in writing via email or text message.
- 6. All information related to the Student & Parent/Guardian shall remain confidential and will only be shared by Success Learning Center upon the Parent's/Guardian's approval.
- 7. Success Learning Center is committed to providing exceptional service. If you are unsatisfied with the services of the tutor assigned to the Student, please contact us immediately and advise us of the problem. We will make every effort to resolve the issue.

Print Name:_____

Signature:_____

Date:_____