

UM-St. Louis College of Business Tutor Approval Form

(UM-St. Louis students desiring to tutor privately for UM-St. Louis Business courses may use this form to request permission from the School of Business to make their names available on the School's tutor list.)

Thank you for your willingness to be listed as a tutor of your peers in the Business courses indicated below. In order to be placed on the tutor list, the College of Business will need to approve you for each of its courses listed based upon the information you provide, and, if required and authorized, your University transcript. The role of the School of Business will be to make available in the manner indicated below your name and telephone no. as a tutor for the approved courses. All arrangements for meeting times, places, and fees will be by agreement between you and the student requesting tutoring. In this capacity you will be acting in the professional role of a self-employed private tutor. It is assumed that you will be seeking approval in courses for which you have command of the material, and that in most cases this will be demonstrated by having acquired a grade of either 'A' or 'B' in the same or equivalent course. Note: The appearance of your name on the referral list does not guarantee that you will be asked to tutor.

Name: _____ Student No.: _____
 Major: _____ Minor: _____
 Circle correct designation: Freshman Sophomore Junior Senior Grad Student
 Address: Street: _____ Telephone No.: _____
 City: _____ State: _____ Zip Code: _____
 Social Security No. _____

I would like to be listed as a tutor during (indicate year): Fall 200__ Winter 200__ Summer 200__

**UM-St. Louis Business Courses
for which I wish to be approved
as a tutor.**

Course No. Course Name

1. _____
 2. _____
 3. _____
 4. _____
 5. _____

Basis for approval

If you have taken the course listed on the left at UM-St. Louis, indicate the semester and the grade earned. If taken elsewhere, list where, when, name of course, and grade earned.

1. _____
 2. _____
 3. _____
 4. _____
 5. _____

Choose ONE of the following, A or B:

A. _____ I request that my name and telephone number be contained on a publicly available tutor referral list residing within the School of Business for the courses for which I am approved by the School to be a tutor,
 and
 that this same information be made available on the 'Tutorial Referral Services' component of the University's internet home page. (Note: This is a read-only data base accessible only to those recognized by the UM-St. Louis computer system as authorized to use the system, i.e., UM-St. Louis students, faculty, and staff.)

B. _____ I request that my name and telephone number be publicly available as part of a School of Business tutor referral list as in A above, but that this information **not be posted on the internet.**

I give permission for a School of Business representative to acquire, if necessary, my UM-St. Louis transcript for the purpose of verifying the above information.

Student signature: _____ Date: _____

(For School of Business use) Under Option A, the School of Business requests that the above indicated courses be posted on the Tutor Referral List of UM-St. Louis' homepage. (Signature of Dept. Rep.) _____
 (Send a copy of this form to Center for Academic Development, 507 Tower, for posting.)
 (Tutor Referral Form, ver. 7/02)