Union City Area Middle/High School

2022-2023 Afterschool Tutoring Program Referral Form

As part of our district’s ongoing efforts to support our students’ academic success, we are providing an after school tutoring program for students in Grades 6-12. This optional program will run from 2:50-3:50 p.m. on Mondays through Thursdays from October 17, 2022 through May 31, 2022. Families must provide their own transportation. Students can be referred for tutoring if they would benefit from additional academic support from core content area teachers. Parents/guardians, teachers, counselors, and administrators can refer students to this optional program. Students can attend daily or weekly for as long as many sessions as needed. Parent/guardian permission is required for students to stay after school.

Teachers from core content areas and special education support are offered daily as follows:

<table>
<thead>
<tr>
<th>Mondays</th>
<th>English/Language Arts, Social Studies, Science, Special Education Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuesdays</td>
<td>English/Language Arts, Mathematics, Science, Social Studies</td>
</tr>
<tr>
<td>Wednesdays</td>
<td>English/Language Arts, Mathematics, Special Education Support</td>
</tr>
<tr>
<td>Thursdays</td>
<td>English/Language Arts, Mathematics, Science, Social Studies</td>
</tr>
</tbody>
</table>

Student’s First & Last Name: ___________________________ Grade: __________

Name of Individual Completing Referral: ___________________________

I am a:

☐ Self/Student
☐ Parent/Guardian
☐ Teacher
☐ Guidance Counselor
☐ Administrator

Reason for Referral: ____________________________________________

Subject Area(s) & Specific Classes in Most Need of Support:

☐ English/Language Arts: _______________________________________

☐ Mathematics: ________________________________________________

☐ Science: ____________________________________________________

☐ Social Studies: ____________________________________________
If you are a classroom teacher and are referring a student who is currently missing work or has make-up assignments, please provide a list below -or- include an attachment listing the items he/she can be working on. Please indicate if those assignments are available in Schoology.

<table>
<thead>
<tr>
<th>Classroom teachers: please list any specific assignments or tasks that this student should be working on if he/she attends the tutoring program. Please indicate below if these assignments are available in Schoology.</th>
</tr>
</thead>
</table>

Signature of Individual Submitting Referral: ____________________________
Date: ______________

Please submit this completed referral form to Mr. Shrout or Mr. Keefer in the MS Office or HS Office.

FOR OFFICE USE ONLY

Date Referral Received: ____________________________
Building Principal Signature: ____________________________

Tasks:
☐ Student added to tutoring referral spreadsheet - Initial: __________
☐ Parent/guardian permission slip sent home - Initial: __________

Update:
Will this student be participating in the after school tutoring program?
☐ Yes
☐ No