

Faculty Reference Form

For University Housing—Office of Residence Life Tutor Applicants

In my opinion, _____ (name of tutor candidate)

(Please check one.)

has

does not have

The academic background and preparation necessary to tutor students in the following courses:

Course name(s) or number(s):

Comments (optional):

Signature: _____

Name: _____

Department: _____ Position: _____

Telephone: _____ Date: ____/____/____

Thank you!

If you have any questions or would like more information about University Housing—Office of Residence Life Tutoring, please contact Michelle Cohenour, Student Learning Coordinator at 335-3700.

PLEASE RETURN THIS FORM TO THE STUDENT; WE ARE REQUIRING THAT THEY SUBMIT THIS INFORMATION WITH THEIR APPLICATION MATERIALS. THANK YOU.