West Sabine
INDEPENDENT SCHOOL DISTRICT

**West Sabine ISD Peer Tutoring Application**

## Peer Tutoring Application

Name_____ Date_____

Student ID #_____ Student Phone # _____

Student Email _____

The peer tutoring program requires peer tutors to **work with students** on improving academic areas such as reading and math skills. Peer tutors may not be assigned to the office,library, or cafeteria. Peer tutors may not prepare lesson materials, grade papers, make copies, or complete any other task that does not involve tutoring a student.

I, _____, understand that as a peer tutor, I will be

working directly with students and will not be utilized for other non instructional activities.

Student Signature: _____

1. What strengths do you have that will help you to be successful as a peer tutor?

_____

_____

_____

_____

_____

2. Which grade levels would you prefer to tutor?

____ Pre-Kindergarten ____ Second Grade ____ Fifth Grade

____ Kindergarten ____ Third Grade

____ First Grade ____ Fourth Grade

Updated 1.11.24

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3. Prior to beginning your Peer Tutoring job,

   A. Complete the Human Resource paperwork for Payroll and turn it in to Mrs. Sherry Boyette at the administration office and You will need the following items and information to complete the paperwork and to take with you to the administration building.:

      - Completed application
      - Your social security card
      - Birth Certificate
      - School ID Card or Drivers Licence

   B. Register for an EduHero account at https://eduhero.net/register.php?authuser=0 and,

   C. complete the assigned EduHero modules found https://eduhero.net/index.php?authuser=0

   D. Complete the Peer Tutor Agreement with Tara Bragg, the high school Student Success Advisor.

4. Once Mrs. Boyett clears you, have her sign below to indicate you have completed the necessary steps for the Payroll department.

_____ has completed all of the required steps for the Peer Tutoring position. This student is ready to receive a teacher assignment and begin their new job.

_____ _____

HR Department Signature Date

Updated 1.11.24

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Prior to signing, review the Peer Tutoring Agreement with the student and obtain the student's signature at the bottom.

_____ _____

Student Success Advisor Signature | Date

_____ _____

Elementary Principal or Assistant Principal | Date

**WS Elementary Peer Tutoring Assignment:**

_____

_____

_____

_____

**Arrival and Departure Times:**

**Arrival:**

_____

**Departure:**

_____

Once the steps above have been completed and the required signatures are collected, make a copy of the application and Peer Tutor Agreement for the student. Retain the originals for your records.

Updated 1.11.24