Davis Learning Center, WSU Davis Campus

Date: _____ Semester _____ Year _____

REQUEST FOR ONE-TIME APPOINTMENT

*Name:*_____ *W#:* _____

*Address:*_____
Street *City* *ST* *Zip Code*

*E-mail:*_____

Telephone # (s) _____/_____ *Circle One: Fr So Jr Sr*

*Best time to be contacted:*_____

Are you paying the Developmental Fee?		☐ *Yes*	☐ *No*	☐ *Unsure*
Is this your first time ever receiving tutoring at Weber State?			☐ *Yes*	☐ *No*
How did you learn about this service?	☐ Flyers	☐ Professor	☐ Other Student	☐ Other_____ _____

FOR OFFICE USE:

Day & Date	Time (e.g, 1pm-2pm)	Course Name and Number (e.g., Math 1010)	Tutor	No-Show or Cancelled?	Comments

Updated March 5, 2009