TUTORING SERVICES Instructor Recommendation



Applicant: Complete this section prior to giving to instructor.				
Name:	FSU Email:			
Major:	Telephone:			
Course with this Instructor:	Semester: Grade:			

Instructor: Complete this section and return to the applicant in a sealed envelope with your signature across the seal.

Please rate your perception of the applicant's abilities below:

	Low			Hig	gh		
Content area knowledge:	1	2	3	4	5	N/A	Comment:
Communication skills:	1	2	3	4	5	N/A	Comment:
Willingness to interact with peers:	1	2	3	4	5	N/A	Comment:
Professionalism:	1	2	3	4	5	N/A	Comment:

Provide any comments regarding the applicant that you deem relevant (attach additional comments if necessary):

In my opinion, this student would be qualified to tutor in the following course(s):								
Instructor Name (Printed):	Email:							
Instructor Signature:	Date:	Phone:						
 Applicant: You must submit two additional documents with this rec Peer Tutor Application Personal Statement On a separate paper, discuss the reasons for your desire to be a peer contribute to your service, and what you believe to be the responsible 	er tutor, including a							

Submit all documents to Andrew Dentzau, Program Coordinator, WJB G015 (850-645-0186, adentzau@fsu.edu)