
Volunteer Tutor Agreement

I understand that by volunteering for the Literacy Council of Buncombe County, I am becoming part of a team that will provide assistance with my tutoring sessions and lend support and encouragement when necessary.

I also understand that my responsibility to the team is:

- To ask questions, maintain open communications, meet with student(s) at the scheduled time (except in case of sickness or emergency, when I will call my student before he/she leaves to meet me).
- To attend in-services each year, maintain accurate reports, administer retesting at the request of my coordinator and forward all information to the office at the scheduled time.
- To notify respective coordinator if any problems arise.
- To follow all other policies and procedures of the Literacy Council.

References

Please provide two local references (excluding relatives). Electronic references, (email contact information), are preferred. If you have just moved to Asheville/Buncombe County, references from your previous location are acceptable. Please notify your references that they will be contacted.

1) Name: _____

Email Address: _____

Phone: _____

Relationship: _____

2) Name: _____

Email Address: _____

Phone: _____

Relationship: _____

Signature _____ Date _____