

**SOAR COST-SHARE TUTORIAL PROGRAM
TUTORING SESSION LOG**

DATES OF PAY PERIOD _____

TUTOR'S STUDENT ID # _____

TUTOR'S NAME _____

INDIVIDUAL TUTORING SESSIONS

Date	Appt. Time Of Session	Student's Name, Phone No., and Email Address	Subject & Course	Tutoring Session Location	Time Session Started (to nearest 15 minutes)	Time Session Ended (to nearest 15 minutes)	No. of Hours	Student Signature	NO Show

This form, accompanied by your "Hourly Employee Time Record," must be completed and turned in to the SOAR Cost-Share office, 130 Hammond Hall, NO LATER THAN 5:00 p.m. on the **15TH** and **last day** of each month (if the 15th or last day falls on a weekend or university holiday, then your forms and vouchers are due the previous day). You must sign both the log and time record.

I hereby certify that (1) the facts stated above are true and correct; and (2) I have provided tutorial assistance.

Tutor's Signature _____