



COQUILLE INDIAN TRIBE

Culture, Education and Library Services

495 Miluk Drive Coos Bay, OR 97420

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www.coquilletribe.org

Tutoring Program Application

Education Department

Student Name: _____ Grade in School: _____

Student Address: _____

Phone: _____ Cell Phone: _____

School Attending: _____ School Phone: _____

Tutor Name/Organization: _____

Address: _____

Phone: _____ Cell Phone: _____

What credentials does this tutor hold that makes her/him qualified to provide services?

By checking this box I certify that this tutor is not a member of my immediate family ☐

A tutor occupies a special position of trust in a child's life, similar to that of a teacher or parent. Parents should be very careful whom they choose to tutor their children. You should never leave your child in the care of a person that may not be safe. The Tribe will reimburse the reasonable costs of a background check for a tutor if requested by a parent. However, background checks are not foolproof, and are not an absolute guarantee of the safety of your child.

- I will ☐ will not ☐ have a background check completed on this tutor.

- **Please attach an Academic Plan which includes:**

- Goals and objectives
- Anticipated time frame

Parent Signature: _____ Date: _____