

# ASC Tutoring Prescription

<i>For Instructors</i>	
<i>Student</i>	
<i>Course</i>	
<i>Instructor</i>	
<i>Specific Objective for Tutoring Session:</i>	
<i>For Tutors</i>	
<i>Date and Time of Session</i>	
<i>Tasks Completed</i>	
<i>Suggestions for student</i>	
<i>Tutor Name</i>	

Student Comments including if learning objectives were met:

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Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**Instructor:** Please complete this form to help focus tutoring for this student.

**Student:** Please bring this form to your tutor in the Academic Success Center, then return it to your instructor after your tutoring appointment.