

Assisting Students with Academic Performance

2019-2020 ASAP Program

Date: _____

Dear Parent of: _____

We are pleased to offer our ASAP tutoring program again this year. This program utilizes the services of parent volunteers to work one on one or in a small group setting with students needing extra assistance. ASAP tutors work with students during the school day at times most appropriate for the teachers and students. Tutors receive materials and directions from the classroom teacher.

Your child's teacher, _____, has recommended _____ be served through the ASAP program. If you wish your child to participate, please sign and return the permission form below.

If you have any questions, please call me at 547-7997.

Sincerely,

Ruth Milite and Rachel McDonald

School Counselors

Assisting Students with Academic Success

ASAP Program Permission Form

Teacher: _____

I grant permission for my child _____ to receive tutoring in the area of _____ through the ASAP program at Julington Creek Elementary School. I understand that if I have any questions about this program or my child's progress, I am encouraged to contact my child's teacher or the school counselor.

Parent Signature: _____

Date: _____