



COMM 292
Peer Tutor Registration Form

Student's Name _____ Email _____

Professor's Name _____ Email _____

Course to Assist: _____

Semester for Peer Tutor: _____ Credit (.25 or .5): _____

In the space provided below, please explain the general purpose behind your serving as a peer tutor for this course:

For your time as a Peer Tutor, please explain the following:

I. Student Learning Goals: (what is your goal in serving as an assistant?)

II. Action: (list types of activities and target deadlines such as readings, reports/papers, projects)

III. Professor Expectations: (include such items as: grading criteria, frequency of contact, quality and quantity of assistance)

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

Department Chair Initials: _____

(Department Use Only) Projects in Communication Course Letter: COMM 292 ____