

Tutoring Table Student Application Form

Tutoring Table is a **mathematics** tutoring program for motivated youth, offered in partnership with the United Way of Calgary and Area.

| PLEASE ENSURE ALL AREAS ARE FILLED OUT CLEARLY. Please Office use only: □ Enrolled □ Wait listed | □ Not Responded □ Not Accepted |
|---|--|
| | ☐ Date Lead Tutor Received |
| | Subsidy (to be completed by school admin. only): Yes No |
| Personal Information | |
| First Name: | Last Name: |
| Gender: Date of Birth (01 June 2003): | Age: |
| Alberta Education Number: | AB Health Card #: |
| Address: | Postal Code: |
| | Student Cell Phone Number: () |
| Student Email Address: | |
| | Relationship to student: |
| Parent Cell Phone Number: () | Alternative Phone Number: () |
| Parent/Guardian Email Address: | |
| □ Saddletowne YMCA (Monday & Woodline Tutoring (Online tutoring will take place via online platform 4:15 – 6:15 pm: □ Monday □ Tuesday □ Wednesday Are you available to meet at least once a week after scheme to the word of the word o | dge YMCA (Thu) Shawnessy YMCA (Mon & Wed) lay) (only for Father Lacombe High School students) lednesday) Genesis Center (Tue) orms) ay Thursday hool for the entire semester? Yes No |
| School Information | |
| Name of School: | · · · · · · · · · · · · · · · · · · · |
| What academic system are you enrolled in at school? Which tutoring semester are you applying for? \square Fall | |
| Which math course will you be taking? ☐ Math 10-3 ☐ Math 30-1 | ☐ Math 10-C ☐ Math 20-1 ☐ Math 20-2 ☐ Math 30-2 ☐ Other: |
| What was the last math class you took? | What was your final mark (%) in that class? |
| What are your plans after you finish High School? | |



| Eligibility – Financial Need | | | | | | | |
|--|--|--|------|--|--|--|--|
| This section must be completed by the student or a parent/guardian. Financial status is one of the criteria for enrolment. | | | | | | | |
| | | | | | | | |
| How many people live in your household? How many of those are working adults (18 or older)? Please indicate any of the following organizations you and/or your family receive assistance from: | | | | | | | |
| | iizations you and/or y | | | | | | |
| □ Calgary Housing Company□ Calgary Food Bank | | ☐ City of Calgary Fee Assistance Card☐ Employment Insurance | | | | | |
| ☐ YMCA Strong Kids Fund | | ☐ None of the above | | | | | |
| Other: | | | | | | | |
| Please indicate the total combined yearl | | | | | | | |
| □ <\$15,000 - \$15,000 \$25,000 | □ \$40 000 - \$50 000 □ \$50 000 - \$65 000 | | | | | | |
| □ \$15 000 - \$25 000 □ \$25 000 \$40 000 | | | | | | | |
| □ \$25 000 - \$40 000 | □ \$65 000 - \$75 000 | 0 □ \$100 000+ | | | | | |
| | | | | | | | |
| Getting to Know You – Student Questi | onnaire | | | | | | |
| Why do you want to join Tutoring Tab | | pply) | | | | | |
| ☐ Want to improve mark in math clas | S | ☐ YMCA Membership | | | | | |
| ☐ Want to improve test-writing skills | | ☐ Get ready for diploma exam | | | | | |
| □ Need help getting homework done | | □ Different learning needs/learning disability□ Need math for chosen career | | | | | |
| ☐ Want to get into university/post-sec☐ Want to meet new people/make frie | | □ Need math for chosen career□ Other: | | | | | |
| Are you currently employed? □No | □Yes | | | | | | |
| If yes, what is your main reason for work | ing? | | | | | | |
| If you do not participate in Tutoring Ta | able, can you access t | s tutoring elsewhere? | | | | | |
| □Yes □ No, because | | | | | | | |
| | | | | | | | |
| Who do you go to for help, advice, or guidance (in your home, school, community)? | | | | | | | |
| | | | | | | | |
| Additional Comments | Please use this | is space for any other information that you would like to sha | ıre. | | | | |
| | | | | | | | |
| | | | _ | | | | |
| Please ensure that all areas are complete. Incomplete applications may not be processed . | | | | | | | |
| I/we confirm that th | e information provided o | l above is complete and true. | | | | | |
| | B (G 1) | | | | | | |
| Student Signature | Parent/Guardian (if student is under | | | | | | |
| | (11 student is under | 1 110 1150 01 10) | | | | | |

<u>Please Note:</u> Completion of this application form does not guarantee a spot in the program. A YMCA staff member must enroll you over the phone into the program.





Tutoring Table Online/In-Person Pre-Participation Agreement

| Personal Information (Please fill out student information) | | rmation) ALL AREAS MUST BE FILLED OUT | |
|--|--------------|---------------------------------------|--|
| First Name: | | Last Name: | |
| Date of Birth: | (mm/dd/year) | Email address (tutoring purpose): | |

IMPORTANT INFORMATION FOR PARTICIPANTS, PARENTS, AND GUARDIANS

Communication from the YMCA Staff:

- YMCA Staff will use their YMCA issued emails or YMCA issued cell phones to communicate with students/guardians for both online and in-person formats. This also includes systems that function in association with their YMCA issued email or cell phone, such as Slack, Teams, zoom, and WhatsApp, etc.
- The Program Manager, Tutoring Supervisor, Tutoring Coordinator, and Lead Tutors are authorized to communicate with students and their guardians. Student information is not shared with their volunteer tutors.

Contacting the YMCA Staff:

- The authorized YMCA Tutoring Staff can be contacted via email during the regular office and tutoring hours
- In the online format, students can use the chat function to communicate with their math tutors
- When logging into the online sessions, all participants are encouraged to use their first and last names as their usernames. Nicknames or inappropriate usernames are not permitted
- If students text a YMCA Staff member, they will get an email response with another YMCA staff CC'd into that email. Parents/guardians are also encouraged to be a part of the communication

Attendance:

- Students must attend ALL tutoring sessions that they signed up for (online or in-person)
- Students must notify their lead tutor at least 8 hours ahead of the session if they are going to be absent

YMCA Core Values: Respect, Honesty, Caring, Responsibility, and Inclusiveness

- Students are expected to be on time for online or in-person sessions, show respectful behavior, be ready and willing to participate and learn, and keep their cell phone on 'vibrate' during the sessions
- The YMCA Staff, volunteers, and participants will keep their social media accounts private from one another in the online sessions
- When students log into the online sessions, their email account may be visible to other participants in the group, by signing this document you are confirming that this is <u>acceptable</u>
- Since we commit to starting the program on time, if you have questions or feedback on the program, try reaching out to your lead tutor 10 minutes before the start of the program
- Adhering to the YMCA Core Values, we ask that you do not screenshot, photograph, or record any part of your tutoring
 during online as well as in-person sessions. The sessions must remain a safe space for all, without judgment. <u>Instances</u>
 of infractions will be followed up with
- For online sessions, we would ask that everyone in the tutoring session to keep their cameras on if possible
- Please note that the sessions may be recorded for security purposes and would not be used for any circulation without your consent





Building healthy communities

- YMCA staff will not contact parents or guardians if students miss a scheduled YMCA tutoring session but will provide
 information to the authorized persons listed on the application form if they request
- Parents: This is an "All in for Youth" program in partnership with the United Way of Calgary and Area. We may be sharing
 the number of program participants with your student's school and the United Way, however, the participant names
 will remain anonymous. By signing below, you are granting us permission to share and gather this information with your
 child's school and the United Way for evaluation purposes
- Students: If you need assistance with program participation (online and/or in-person), basic needs (food, housing, etc.),
 mental health, or personal safety, please contact the tutoring supervisor-Tanzeela Naji or Youth Engagement ManagerSonalin Bhayani ASAP. We will help you access the resources. If you have concerns about your immediate personal
 safety, ask us about "where we buy our clothes?" and we will contact Police on your behalf
- If you have any questions or concerns, please do not hesitate to reach out We want to hear from you so that we continue to improve our services and your learning experience

Participants must confirm they have read and understood all clauses. Participants under 18 years will need guardian/parental authorization to participate in Tutoring Table Program (in-person, blended, or fully online formats)

CONSENT FORM I have read and understood this form. I know about the YMCA Tutoring Table program and the services provided. I believe that I / my

child would benefit by participating in the online/ in-person Tutoring Table. My signature below confirms my authorization to

| program participation. | | | |
|--|---|---|--|
| Student's Name | | Parent/Guardian's Name (if student is under 18) | |
| Student's Signature | | Parent/Guardian's Signature (if student is under 18) | |
| Date (DD/MM/YY) | | Date (DD/MM/YY) | |
| | Model Release | Form | |
| | YMCA Calga | ry | |
| | United Way of Calgary and | d Area Funded Programs | |
| YMCA Calgary is committed to k or trade personal information. | eeping the information it collects | from its participants private. YMCA Calgary does not rent, sell | |
| YMCA Calgary acknowledges t Protection of Privacy Act (Albert | • | ollected will be subject to the Freedom of Information and | |
| | ram to evaluate its effectiveness information on a computer datal | in providing its service, certain information is required. This base. | |
| • | . When using this information in | his service and will be used for preparing reports for the funde a group, I understand that any identifying information such as | |
| I | authorize the YMCA | Calgary to collect and process my personal | |
| (Participant's name) | t's name) information for program evaluation purposes. | | |

