

Akron Area Electrical JATC Apprentice Tutoring Request Form

Directions: Fill out the information below and submit to the JATC office. This tutoring will occur on Saturdays from 8:00 am to 12:00 pm at the JATC.

Name _____

Date of Request _____

Subject of Tutoring _____

| Date of Tutoring (Circle One) | September | October | November | December | January | February | March | April | May |
|-------------------------------|-----------|---------|----------|----------|---------|----------|-------|-------|-----|
| | 14 | 5 | 2 | 7 | 4 | 1 | 7 | 4 | 2 |
| | 21 | 12 | 9 | 14 | 11 | 8 | 14 | 11 | 9 |
| | 28 | 19 | 16 | 21 | 18 | 15 | 21 | 18 | |
| | | 26 | 23 | | 25 | 22 | 28 | 25 | |
| | | | | | 29 | | | | |

Signature _____

Date _____