**NOTICE TO STUDENT-ATHLETES**: Please fill out this request form as the information listed below is needed for you to receive credit for study hall hours conducted off-site (away from 2nd Floor library).

<table>
<thead>
<tr>
<th>Date: _______________</th>
<th>Time In: ____________________</th>
<th>Time Out: ____________________</th>
</tr>
</thead>
</table>

**Student Name:** ___________________________________________  **D#:** ____________________

**Sport:** ____________________________________________________

**Course Title:** ______________________________________________

**Professor Name:** ____________________________________________

**Tutor Name:** _______________________________________________________________________

**Location of tutoring (to be conducted in an academic setting, i.e. Bank of America building, Mishoe Center, Professor’s Office, ETV Math lab, etc.):**
_____________________________________________________________________________________

**Describe, in detail, materials covered during tutoring:**
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

**Tutor Signature** ___________________________  **Date/Time** ___________________________

**Student-Athlete Signature** ___________________________  **Date/Time** ___________________________

**Professor Signature (if tutoring was conducted by Professor)** ___________________________________________  **Date/ Time** ___________________________

---

**For Office Use Only**

This form was received by ___________________________________________

Enter in the system by ___________________________________________

Placed in the student file by ___________________________________________  **Signature** ___________________________  **Date/Time** ___________________________