



## Academic Enhancement at Southern Tech

**Please complete this form to request Academic Tutoring.**

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

High School: \_\_\_\_\_ SoTech Career Major: \_\_\_\_\_ AM / PM

Circle the course/courses in which the Student needs intervention:

Algebra II      Geometry      Pre-Calculus      Calculus      Math of Finance      ACT Prep

College Algebra      Other \_\_\_\_\_

Please list the areas of deficiency in which tutoring is requested:

Missing Assignments (Section and Page numbers)

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Study for a Test (what chapter)

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Specific Assignment (section and Page Number)

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High School Teacher Signature: \_\_\_\_\_

Counselor Signature: \_\_\_\_\_

**\*RETURN COMPLETED FORM TO Kenneth Shade: [kshade@sotech.edu](mailto:kshade@sotech.edu)  
or FAX: 580-224-9441**