

Tutoring Permission Form

Dear Parent/Guardian:

I am a First Grade teacher at Washington Elementary School and a student in the Reading Specialist and Supervisor program at Rutgers University. This semester I am enrolled in a course titled, "Diagnosis and Correction of Reading Difficulties." I am required to meet with a student who is struggling with reading, conduct assessments that will provide insight into this student's literacy needs, and then provide free one-on-one tutoring in literacy/language arts.

I would like to invite [CHILD'S NAME] to participate in these free tutoring sessions. As part of the tutoring, I will be video and/or audio recording parts of these tutoring sessions to share with my professor so that they can provide instructional suggestions that will support these tutoring sessions. This video and/or audio will only be shared with my professor, Dr. Catherine Rand.

I am required to write a report of my assessments of the child's reading skills and the reading interventions I do with them. I will not include your child's name in the report and will use a pseudonym to speak about my work with them to my professor and classmates. All information collected will be kept confidential and stored in a binder or my personal Rutgers Google Drive that may need to be reviewed by Rutgers or the Department of Education in order to receive certification as a reading specialist. Once this process is complete, all related documentation and recordings will be deleted or shredded.

If you allow your child to participate in these free tutoring sessions, all sessions will be scheduled at your convenience in an agreed upon location. You will receive a copy of my final report for your records. If at any point, you do not want your child to continue tutoring, you are free to stop with no repercussions.

Please indicate whether you will allow your child to be involved. If you would like any additional information about these tutoring sessions, please feel free to contact me at echristenson@twpunionschools.org. You can also contact my professor by email at catherine.rand@rutgers.edu.

Sincerely,

Erin Christenson

Please check one of the following boxes:

☐ I agree to allow my child [CHILD'S NAME] to participate in literacy tutoring sessions. In addition, I agree to the audio and/or video recording of these sessions for educational purposes only.



RUTGERS

Graduate School of Education
Rutgers, The State University of New Jersey
10 Seminary Place
New Brunswick, NJ 08901

☐ I do not agree to allow my child **[CHILD'S NAME]** to participate in literacy tutoring sessions; I do not agree to the audio and/or video recording of these sessions.

Parent/Guardian Name (Print) _____

Parent/Guardian Signature _____ Date _____