



Martin Miracles Tutor Agreement

Name of Child _____

Street Address _____

City _____ State _____ Zip Code _____

Email Address _____ Grade _____

Home Phone _____ Mobile _____

Name of Tutor _____

Street Address _____

City _____ State _____ Zip Code _____

Email Address _____

Home Phone _____ Mobile _____

Name of Tutoring Center _____

Street Address _____

City _____ State _____ Zip Code _____

Email Address _____ Work Phone _____

Please check the timeframe tutoring service is required:

- Academic School Year 2017-2018
- Summer 2018
- Academic School Year 2017-2018 & Summer 2018

Please check the option in which tutoring service is required:

Option 1:

Elementary School Level

- Science _____
- History _____

- English _____
- Foreign Language _____
- Reading _____
- Executive Functioning _____


Option 2:

Middle School & High School Level

(What course?)

- Science _____
- History _____
- English _____
- Foreign Language _____
- Reading _____
- Executive Functioning _____

Option 3:

Travis  Michael Perry Math Scholarship

Elementary School Level, middle school & high school Level

(What level? For example, Algebra, Geometry, Pre-calculus)

- Math _____

Additional Option:

ACT or SAT Course

(Available for students starting summer before 11th grade Through 12th Grade)

- SAT _____
- ACT _____

- Please fill out form and attach the required documentation to demonstrate the tutor(s) you have chosen is accredited (teaching certification, degree, and/or a college transcript demonstrating a minimum of 24 credit hours in the chosen academic subject). If using multiple tutors, please submit a Tutor Agreement form for each tutor along with the above-mentioned documentation. Tutor(s) must be employed or contracted through an accredited tutoring center.

Email or mail completed application and all supporting documents to:

apply@martinmiracles.org

or

Martin Miracles, Inc.
P.O. Box 4328
Cave Creek, AZ 85327

For Office use only:

Date received _____
Signature of receipt _____

For Office use only:

Date received _____
Signature of receipt _____