

EBHS Science Honor Society Tutoring Log

Tutor's Name: ______ Tutee's Name: _____

Tutee's Course: ______

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Date	Location	# of Hours Tutored (max 3 per week)	Tutee Signature	Tutor Signature	Summary of what you went over during your tutoring session

MUST BE SUBMITTED BY THE LAST DAY OF EVERY MONTH FOR HOURS TO COUNT

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TOTAL HOURS: _____

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