

THE LEARNER SUPPORT CENTRE - REFERRAL FORM

NAME: FIRST _____ LAST _____

STUDENT NO: _____ PROGRAM: _____

YEAR OF STUDY: _____ COURSE CODE(S): _____

PHONE: _____ EMAIL: _____

REFERRED BY: _____ DATE: _____

Check Below where appropriate	Number of Visits
Are you a 1 st generation student? <input type="checkbox"/>	

Tutoring Required In: Check the subject topics in which tutoring is required.

SUBJECT	SUBJECT	SUBJECT
<p style="text-align: center;">WRITING SKILLS</p> Basic Writing <input type="checkbox"/> (e.g. Parts of Speech, Grammar, Sentence Structure, Punctuation) Business Writing <input type="checkbox"/> (e.g. Letters, Memos, Reports) Writing a Research Paper <input type="checkbox"/> Web Research <input type="checkbox"/> Bibliography and Citing <input type="checkbox"/>	<p style="text-align: center;">MATHEMATICS SKILLS</p> Business Mathematics <input type="checkbox"/> Business Statistics <input type="checkbox"/> Word Problems <input type="checkbox"/> Algebra <input type="checkbox"/> Trigonometry <input type="checkbox"/> Geometry <input type="checkbox"/> Calculus <input type="checkbox"/> Scientific Calculator <input type="checkbox"/> Other <input type="checkbox"/>	<p style="text-align: center;">STUDY SKILLS</p> Learning Styles <input type="checkbox"/> Memory Skills <input type="checkbox"/> Note Taking <input type="checkbox"/> Reading Comprehension <input type="checkbox"/> Study Habits <input type="checkbox"/> Test Taking <input type="checkbox"/> Time Management <input type="checkbox"/>
<p style="text-align: center;">COMPUTER APPLICATIONS</p> Windows <input type="checkbox"/> Office <input type="checkbox"/> Internet <input type="checkbox"/> Email <input type="checkbox"/> Keyboarding <input type="checkbox"/> Other <input type="checkbox"/>	<p style="text-align: center;">PHYSICS</p> Vector Geometry <input type="checkbox"/> Kinematics <input type="checkbox"/> Statics and Dynamics <input type="checkbox"/> Electricity and Magnetism <input type="checkbox"/> Thermodynamics <input type="checkbox"/> Fluid Mechanics <input type="checkbox"/> Other <input type="checkbox"/>	<p style="text-align: center;">CHEMISTRY</p> Organic <input type="checkbox"/> Stoichiometry <input type="checkbox"/> Reactions and Equations <input type="checkbox"/> Chemical Processes <input type="checkbox"/> Other <input type="checkbox"/>
<p style="text-align: center;">BUSINESS</p> Marketing <input type="checkbox"/> Macroeconomics <input type="checkbox"/> Microeconomics <input type="checkbox"/> Human Resource Mgmt <input type="checkbox"/> Business Finance <input type="checkbox"/> Financial Calculator <input type="checkbox"/> E-Business <input type="checkbox"/> Other <input type="checkbox"/>	<p style="text-align: center;">ACCOUNTING</p> Financial <input type="checkbox"/> Cost <input type="checkbox"/> Managerial <input type="checkbox"/>	<p style="text-align: center;">BIOLOGY</p> Biochemistry <input type="checkbox"/> Cell Biology <input type="checkbox"/> Genetics <input type="checkbox"/> Other <input type="checkbox"/>
		<p style="text-align: center;">POLICE FOUNDATIONS TEST</p> Logic <input type="checkbox"/> Mathematics <input type="checkbox"/> Vocabulary <input type="checkbox"/> Spatial <input type="checkbox"/>

OTHER SUBJECTS: _____

YOUR COMMENTS: _____
