

Bright Scholars University
Las Vegas, Nevada 89149
725-212-5166 Business
drjaimarie@brightscholarsuniversity.org
School Year 2020-2021

Date: _____

Child's Name: _____

Current Grade Level: _____

Student's DOB: _____

Student's Age: _____

Parent(s)/Guardian(s) Name: _____

Parent's Phone Number(s): _____

Parent's Email(s): _____

Current School: _____

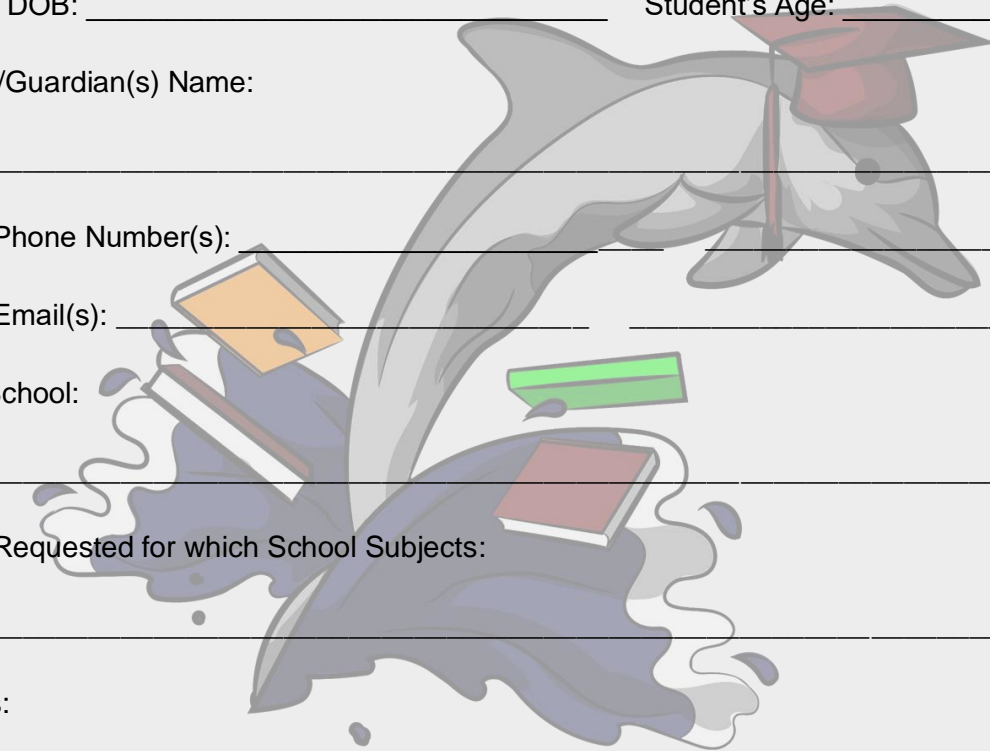
Tutoring Requested for which School Subjects: _____

Strengths: _____

Weaknesses: _____

Availability for Assessment of school subjects (list at least three different days and times): _____

Parent(s)/Guardian(s) Signature(s): _____



**BRIGHT SCHOLARS
UNIVERSITY**