



VUOTS Fall Tutoring Registration Packet



Victoria Urban Outreach Tutoring Services Fall Tutoring Registration Packet – Grades K–8

Victoria Urban Outreach Tutoring Service (VUOTS)
www.vuots.org | vuotssupport@vuots.org | (267) 312-9345 Empowering Communities Through Education

Confidentiality Notice: This document contains confidential information intended for the recipient only. If you received this document in error, please notify us immediately.



VUOTS Fall Tutoring Registration Packet

The following sections are organized to streamline the registration process for families, ensuring we gather vital information while creating a simple and efficient way to enroll children in free tutoring services:

1. **Program Overview**
 2. **Student Registration Form**
 3. **Parent/Guardian Contact & Emergency Info**
 4. **Academic Needs & Subject Focus**
 5. **Household Information & Eligibility**
 6. **Media Consent Form**
 7. **Signature & Agreement**
-

1. Program Overview



Victoria Urban Outreach Tutoring Services (VUOTS) is dedicated to bridging academic gaps for youth in Philadelphia. Our tutoring program offer personalized assistance in essential subjects such as math, reading, and writing.

Key Features:

- **Free Tutoring Services:** All services are provided at no cost, ensuring equal access to education.
- **Weekly Sessions:** Tutoring occurs every Saturday, totaling up to 10 hours throughout the fall season.

Important Guidelines for Parents/Guardians:

- **Drop-off and Pick-up:** Students may be left for tutoring sessions, but they must be picked up on time. If a student arrives 15 minutes after a session, the tutoring session will be forfeited. Repeated lateness (more than two instances) may result in the student being asked to leave the program.

Victoria Urban Outreach Tutoring Service (VUOTS)
www.vuots.org | vuotssupport@vuots.org | (267) 312-9345 **Empowering Communities Through Education**

Confidentiality Notice: This document contains confidential information intended for the recipient only. If you received this document in error, please notify us immediately.



VUOTS Fall Tutoring Registration Packet

- **On-Site Attendance:** Parents, guardians, or caregivers may stay during tutoring sessions. However, we kindly ask that they remain quiet and non-disruptive, as this helps maintain a focused learning environment. Currently, we are unsure if there will be a separate waiting area; please be prepared for any option.
 - **Behavior Expectations:** Students are expected to respect the tutoring space and the materials used. While behavior challenges are tolerated on a case-by-case basis, this will depend on the information provided by parents during the registration process. It is essential to provide accurate information to help us support your student appropriately.
-

2. Student Registration Form



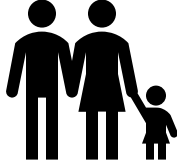
Please fill out the following information to register your child for the VUOTS Fall Tutoring Program:

- **Student Name:** _____
 - **Grade (Fall):** _____
 - **School:** _____
 - **Date of Birth:** _____
 - **T-shirt Size (optional):** _____
 - **Fill in the year 20**____
-



VUOTS Fall Tutoring Registration Packet

3. Parent/Guardian Contact & Emergency Info



Critical contact information is essential for ensuring the safety and well-being of your child. Please provide the following:

- **Parent/Guardian Name:** _____
- **Phone Number:** _____
- **Email:** _____
- **Emergency Contact (Name & Number):** _____
- **Relationship to Student:** _____

We will contact you in case of emergencies or changes to the tutoring schedule. Keeping communication open helps us support your child's needs better.

4. Academic Needs & Subject Focus



In order to tailor our programming to best serve your child's needs, please check any areas where your child may require additional support:

- ☐ Reading (Phonics, Comprehension, Vocabulary)
- ☐ Writing (Creative writing, Grammar, Essay writing)
- ☐ Math (Basic arithmetic, Word problems, Algebra)
- ☐ Homework Help (General assistance with daily assignments)
- ☐ Other: _____

Victoria Urban Outreach Tutoring Service (VUOTS)

www.vuots.org | vuotssupport@vuots.org | (267) 312-9345 **Empowering Communities Through Education**

Confidentiality Notice: This document contains confidential information intended for the recipient only. If you received this document in error, please notify us immediately.



VUOTS Fall Tutoring Registration Packet

Notes:

Identifying specific needs allows our tutors to focus on individualized learning plans, ensuring each student progresses at their own pace.

5. Household Information & Eligibility



VUOTS is committed to serving families in need. Please answer the following questions to assist us in determining eligibility:

Is your household considered low-income (adjusted gross income level, receiving SNAP, Medicaid, or other benefits)?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

Total number of people in household: _____

Understanding household qualifications helps us allocate resources effectively and prioritize families who need assistance the most.

Victoria Urban Outreach Tutoring Service (VUOTS)

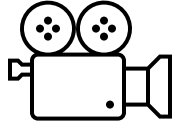
www.vuots.org | vuotssupport@vuots.org | (267) 312-9345 **Empowering Communities Through Education**

Confidentiality Notice: This document contains confidential information intended for the recipient only. If you received this document in error, please notify us immediately.



VUOTS Fall Tutoring Registration Packet

6. Media Consent Form



Media Release Agreement

I give permission for my child, _____, to be photographed or recorded during VUOTS tutoring sessions. These materials may be used for VUOTS promotional purposes including:

- **Website Features**
- **Printed Flyers**
- **Social Media Campaigns**

Additionally, I understand that our affiliates participating with VUOTS may also photograph, video, and record my child during these sessions.

- ☐ Yes, I give permission
- ☐ No, I do not give permission

Your consent will allow us to showcase the exciting learning experiences taking place at VUOTS, helping us attract further support and resources.

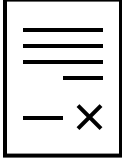
Parent/Guardian Signature: _____

Date: _____



VUOTS Fall Tutoring Registration Packet

7. Signature & Agreement



Acknowledgment of Enrollment

I acknowledge that I am enrolling my child in the VUOTS tutoring program for Fall 2025. I understand:

- **Participation is Voluntary:** My child is free to choose to attend or not.
- **Limited Space:** There may be a maximum number of spots available, and this packet serves to reserve my child's space.
- **Transportation:** I am responsible for arranging transportation to and from tutoring sessions.

Parent/Guardian Signature: _____

Date: _____