

TUTORING ENROLLMENT FORM

Please fill out and return to
 104 CANX Lab Building

Personal Information

Full Name: _____ Date: _____
 Last First M.I.

Cell Phone: () _____ Local Phone: () _____

UTC E-Mail Address: _____ UTC ID: _____

Demographic Information

Male Female Age: _____ Race: _____

Home Town: Chattanooga Knoxville Memphis Nashville Other: _____

Housing: Boling Decosimo Guerry Johnson Obear Lockmiller Stagmaier
 Stophel UC Foundation Walker Off-Campus

Academic Information

Major: _____ Minor: _____ Current GPA: _____

Classification: Freshman Sophomore Enrollment Status:
 Junior Senior Full-Time Part-Time

Tutoring Information

Please check all courses you would like to receive tutoring and identify the professor, title, and CRN for each course.

MATH

MATH 1010 MATH 1130 MATH 1710 MATH 1720 MATH 1730 MATH 1830 MATH 1920
 MATH 1950 MATH 1960 MATH 2100 MATH 2200 MATH 2450

BIOLOGY

BIOL 1110 BIOL 1120 BIOL 1130 BIOL 2060 BIOL 2080 BIOL 2100 BIOL 3250

CHEMISTRY

CHEM 1110 CHEM 1120 CHEM 3010 CHEM 3020

NURSING

NURS 2260

PHYSICS

ENGR 1030 ENGR 1040 PHYS 1030 PHYS 1040

ECONOMICS

ECON 1010 ECON 1020

Professor: _____ Course: _____ CRN# _____

Professor: _____ Course: _____ CRN# _____

Professor: _____ Course: _____ CRN# _____