

Professor's Recommendation Form

Please complete this form and e-mail it to sdctutor@brocku.ca or send it to the Student Development Centre through inter-departmental mail.

NOTE: The information on this form will remain confidential and will not be available to the prospective tutor.

1) Name of Professor/Instructor: _____

2) Name of Prospective Tutor: _____

3) Please list the courses which you may provide a recommendation for:

4) Please rate your opinion of this prospective tutor for the courses listed above:

I strongly recommend this student	
I recommend this student	
I do not recommend this student	

5) Please add any comments regarding this prospective tutor's qualifications:

6) Do you know of any specific criteria that your department might have for peer tutors that the Tutor Registry should keep in mind? If so, please describe below:

Brock University protects your privacy and your personal information. The personal information requested on this form is collected under the authority of *The Brock University Act, 1964*, and is in accordance with the *Freedom of Information and Protection of Privacy Act (FIPPA)* for the administration of the University and its programs and services. Direct any questions about this collection to the Tutor Registry Coordinator, of the Student Development Centre at sdctutor@brocku.ca or visit www.brocku.ca/learning for more information.



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