



RCReads
Rutherford County Reads
255 Callahan Koon Rd
Spindale, NC 28160
828-287-6117
rutherfordcountyreads@gmail.com
www.rcreads.org

Tutor Agreement and Confidentiality Statement

RCReads (“Literacy Council”)

I, (please print full name) _____, have agreed to be a tutor for the Literacy Council. I understand that my duties as a volunteer for the Literacy Council as described in the training I received, including without limitation, my agreement to comply with the following duties and obligations:

1. I agree I will meet with my assigned student for one to two hours a week of tutoring for at least six consecutive months or as often/long as the student and I agree is helpful.
2. I agree to make every effort to attend every scheduled tutoring session and to be on time. If there is an emergency or illness, then in such event, I will contact my student as early as possible if I will be delayed or otherwise am unable to attend the meeting.
3. I will keep “Weekly Tutor Logs” documenting my volunteer hours (travel, preparation, and tutoring time) and my student’s hours and progress.
4. I will end each tutoring session by making sure we both understand when our next session is scheduled and that the student knows what homework or preparation is required for the next session.
5. If I have any problems with my student or the tutoring sessions, I will call the Literacy Council representative at 287-6117 or email April Young at april.young@rutherfordcountync.gov or Esther Lusk at elusk28746@gmail.com. **I will not stop tutoring without letting the Literacy Council know.**
6. I will not disclose information regarding my student to any person or entity other than the designated leadership of the Literacy Council. Any requests for information by any third party will be referred to the Literacy Council and I will comply with all of their requirements or conditions for such disclosure, including without limitation obtaining my student’s written consent. Provided however, after giving notice to the Literacy Council, I may comply with any court order or subpoena for such disclosure irrespective of any requirement or conditions of the Literacy Council. I agree to immediately deliver to the Literacy Council a copy of any such Court Order.

7. I understand that it is the policy of the Literacy Council to have all tutoring take place in a public place and for all participants to arrange their own transportation to tutoring sessions. If my student and I decide to meet in non-public facility or use one another's private vehicles for transportation, I understand that we are doing so strictly at our own risk and therefore I agree to sign separate waiver and release forms as approved from time to time by the Literacy Council evidencing my understanding of these risks.

8. I understand that if I do not comply with the terms of this Agreement, the Literacy Council reserves the right to terminate my services as a tutor.

9. I understand that it is policy of the Literacy Council that all educational services provided to students shall be free from political and religious content.

Tutor's name (please print) _____

Signature _____

Date _____