

**Arkansas Tutoring Corps - Time Verification Form-
ArkansasTutoringCorps@gmail.com**

Tutor's Name _____

Name of Site: _____

Cell Phone: _____ **Work Phone** _____

Email: _____

Hours Tutored: _____ **Indicate which level hours are for:** _____

Site Contact's Name/Signature

Contact's Name _____

Signature: _____

Job Title: _____

Cell Phone: _____ **Work Phone** _____

Email: _____

Address of Site: _____



Email to: ArkansasTutoringCorps@gmail.com with proper subject line and separate from other documents.

To be completed by the Office of Education Renewal Zone:

Has site been approved and verified by Office of ERZ? Yes _____ No _____ Initials _____