

First Name: _____ Last Name: _____
 Student Number: _____ Access Facilitator: _____
 Study Period: Fall Winter Spring/Summer

- If you received BSWD/CSG-PDSE funds to pay a tutor, complete and submit this form with tutor's signature.
- If you received tutoring for more than one course, complete a separate Tutoring Receipt Form for each course.

Tutor Information (please print)		
Last Name/Family Name	Given Name(s)	Address
Telephone	E-mail	Course
Tutor Education/Qualifications (and agency name if applicable)		

Session Start and End	
Start Date of Tutoring Sessions:	
End Date of Tutoring Sessions:	
Total Number of Hours Per Week: *	
Total Number of Weeks:	

FINAL CALCULATION	
Total Hours (hours/week X # of weeks) (a):	
Rate Per Hour (b):	
Total Hours (a) x Rate (b) = TOTAL:	\$

*Note: hours of tutoring **cannot exceed** the number of course hours per week. For example, if a course is three hours each week, you cannot receive more than three hours per week of services for that course.

Any unused portion of the bursary must be repaid and attached to this form. Make cheque payable to *Ryerson University*.

Tutor Declaration

I acknowledge services and payments were provided as outlined above.

Tutor Signature

Date

Student Signature

Date