

Confirmation of Peer Tutoring Authorization

Date: [Insert Date]

To: [Tutor's Name]

From: [Your Name]

Subject: Confirmation of Peer Tutoring Authorization

Dear [Tutor's Name],

We are pleased to inform you that your application for peer tutoring has been approved. You are now authorized to provide tutoring services to fellow students in the subject of [Insert Subject].

Please ensure that you adhere to the following guidelines:

- Sessions should be held at [Insert Location] during [Insert Hours].
- Each session should be a minimum of [Insert Duration].
- Keep track of your tutoring hours and submit them at the end of each month.

If you have any questions or require further assistance, feel free to contact us at [Insert Email/Phone Number].

Thank you for your commitment to helping your peers succeed!

Sincerely,

[Your Name]

[Your Title]

[Your Institution]