

# Peer Tutoring Participation Consent

Date: \_\_\_\_\_

To Whom It May Concern,

I, [Parent/Guardian Name], hereby give my consent for my child, [Student Name], to participate in the Peer Tutoring Program at [School Name]. I understand that this program aims to enhance academic skills and foster a collaborative learning environment.

By signing this letter, I acknowledge that I have reviewed the details of the program and understand its objectives and activities. I am aware that my child will be paired with a peer tutor to receive assistance in subjects where they may need additional support.

Contact Information:

Parent/Guardian Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Thank you for this wonderful opportunity for my child to improve their learning experience.

Sincerely,

[Parent/Guardian Name]