

109 Community College Road
Ahoskie, NC 27910



Changing lives through learning

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www.roanokechowan.edu

Student Support Services

Date _____

**STUDENT SUPPORT SERVICES
TUTOR RECOMMENDATION FORM**

Recommended as prospective tutor in the following course(s):

Dear: _____

I have interviewed _____ for a tutor position in the Student Support Services Program.
Your name has been given as a reference.

Please rate the individual in the following categories:

	Above Average	Average	Below Average	Do Not Know
Mastery of Subject Matter				
Skill in Performance				
Grammar Skills/Articulation				
Accepts Responsibility				
Poise, Emotional, and Mental Stability				

OUTSTANDING WEAKNESS (ES): _____

OUTSTANDING STRENGTH(S): _____

COMMENTS: _____

**Instructor's
Signature** _____

Sincerely,

Lorraine Chavis Mitchell, Director
Student Support Services