## Riverside City College Supplemental Academic Support Accountability Sheet

Name: Last, First:							Month:					
Date	Faculty meeting	Embedded tutor	In-class model	Study Group	Group Tutoring	Prep time 1 hr. max per week	Class Instructor	Subject	Time in	Time out	Hours	Faculty Signature or Signature of staff member on duty.
UPLOAD THIS FORM ONCE A WEEK: https://forms.office.com/r/iUzmsDjh9y							Tutor SignatureDate					Date