**TOWN OF GAINESVILLE PUBLIC LIBRARY, SILVER SPRINGS, NEW YORK TUTOR POLICY**

The Town of Gainesville Public Library (“the Library”) permits tutoring of school-aged students in its facility in accordance with Library policies. The Library does not sponsor, recommend, or assume liability or responsibility for the work and/or activities of tutors who use Library spaces, and reserves the right to deny tutoring on the premises for failure to adhere to Library policies.

* Arrangements for tutoring must be made with the knowledge between the tutor, student, parents and school that sessions are to be held at the Library.
* The *Library phone is not available for tutor or student use*. The Library Director or staff may relay messages to student regarding whether the tutor will be late or absent.
* Tutoring may be held in the Community room thereby offering a degree of privacy.
* If a computer is necessary for the tutoring the student and tutor will be required to have a valid library card granting computer use status.
* The computers are configured with web browsing software, Microsoft Office, and other common applications, *no software may be installed by student or tutor*. The computer can be used to print papers related to the tutoring session. Any file saved to the computer will be permanently deleted when the computers power off at closing time.
* Patrons that have been suspended from the Library are not permitted on the premises

for tutoring.

* Tutors are responsible for the behavior of their students while in the library.
* If in a separate room, the door remains open.

**The Tutor Agreement Form must be signed by both the student and the tutor.**

I have read and agree to the Tutor Policy of the Town of Gainesville Library.

Student Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tutor Name Printed: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Tutor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The organization that hired you to tutor; school district, private, other.

 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**This Tutor/Student form will be retained for three (3) years past date of the end of tutoring.**

ADOPTED BY THE LIBRARY BOARD OF TRUSTEES: April 15,2024