

**DOCUMENTATION OF TUTORING SERVICES  
MUST ACCOMPANY A CANDIDATE'S REQUEST FOR PRAXIS I WAIVER  
TENNESSEE TECHNOLOGICAL UNIVERSITY**

**NAME OF CANDIDATE** \_\_\_\_\_

**STUDENT ID# OR SS #** \_\_\_\_\_

**MAJOR TEACHING FIELD** \_\_\_\_\_

**PRAXIS I TARGET AREA(S):**

Circle all that apply to the tutoring services provided

MATH

READING

WRITING

**Statement of support**

I have facilitated the tutoring services and make the following recommendation:

\_\_\_\_\_ Based upon commitment and progress gained, I support the candidate's request for the waiver of the PRAXIS I requirement for the TTU Teacher Education Program.

\_\_\_\_\_ Based upon lack of commitment or progress gained, I do not support the candidate's request for the waiver of the PRAXIS I requirement for the TTU Teacher Education Program.

\_\_\_\_\_ I have attached the following evidence / documentation to support my recommendation:

Log of hours with dates and times specified

Description of methods / materials used

Evidence of student progress in target area(s): Math, Reading, Writing

\_\_\_\_\_  
Signature of Tutoring Service Provider

\_\_\_\_\_  
Date

\_\_\_\_\_  
Affiliation

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
E-mail

**PRAXIS I TUTORING TIME SHEET**  
Include this form with the Documentation of Tutoring Services

**NAME OF CANDIDATE** \_\_\_\_\_

**STUDENT ID# OR SS#** \_\_\_\_\_

<b>DATE</b>	<b>TIME IN</b>	<b>TIME OUT</b>	<b>COMMENTS OR TOPICS COVERED</b>

**SIGNATURE OF TUTOR** \_\_\_\_\_

**DATE** \_\_\_\_\_