Pre-Consultation Form

This will be a form to understand students strengths, weaknesses, what they enjoy and are passionate about, their subject level and aspirations. It will also help to gauge the expectations the student has for the sessions and what they would like to get from them. This form also gives an understanding of when the student would feel happy to have sessions due to the uniqueness of me relocating to Australia - I will always try my best to be flexible and adaptable!

* Required

Contact Details

Feel free to put parent/guardians details instead of / as well as if it would help as I will use these details to reach out to you to setup our first free consultation to understand further your expectations and current level of mathematics.

| 1. | Full name |
|----|--|
| | |
| 2. | Phone number (please include the country calling code) |
| | |
| 3. | Email address |
| | |
| 4. | What is your preferred way to be contacted (feel free to pick more than one option). WhatsApp |
| | Zoom |
| | Facetime |
| | Teams |
| | Other |
| | |
| 5. | If other was chosen please state below and I will see if I can accommodate |
| | |

Level of Study

| 6. | Wha | at level of study are you currently at * |
|----|-------|--|
| | | Degree |
| | | A-Level Further Mathematics |
| | | A-Level Mathematics |
| | | GCSE |
| | | MAT |
| | | STEP |
| | | Other |
| | | |
| 7. | If ot | her was choose please state below. * |
| | | |
| | | |
| 8. | If ap | pplicable please state any relevant courses taken prior to your current level of study * |
| | | |
| | | |
| 9. | | at year are you currently in * |
| | rieas | e also state whether it is secondary, sixth form or degree in your answer |
| | | |

Learning Preferences

| 10. | Forn | nat of sessions |
|-----|------------|---|
| | \bigcirc | 1-1 Sessions |
| | \bigcirc | Group Sessions |
| | \bigcirc | Both |
| | \bigcirc | Other |
| | | |
| 11. | If ot | her was chosen please state your answer below |
| | | |
| | | |
| 12. | Wha | at is your preferred pace and teaching-style |
| | \bigcirc | Slower more detailed approach |
| | \bigcirc | Faster-paced review of questions |
| | \bigcirc | Exam-style questions |
| | \bigcirc | Other |
| | | |
| 13. | | her was chosen or a more detailed description helps understand your needs more oughly please answer below |
| | | |

Tutoring Goals and Objectives

It is okay if do not feel comfortable answering all these questions will gain a better understanding during our first meeting.

| 14. | What topics of your course do you find most challenging (if you can rank highest to lowest). |
|-----|--|
| | |
| 15. | What topics do you feel most confident with (if you can rank highest to lowest). |
| 16. | What topics would you most like to focus on |
| 17. | What have been your most recent grades |
| 18. | What grades are you aiming to achieve |
| 19. | Do you have any short-term goals you would like to achieve |
| 20. | Do you have any long-term goals you would like to achieve |
| | |

Scheduling & Availability

I try my best to be flexible with timings but if slots have already been filled it is unlikely I will be able to accommodate so please do choose multiple options to increase the likelihood of starting our math journey together.

| 21. | Plea | se select the days you would be available for tutoring * |
|-----|------------|--|
| | | Monday |
| | | Tuesday |
| | | Wednesday |
| | | Thursday |
| | | Friday |
| | | Saturday |
| | | Sunday |
| | | |
| 22. | Plea | se select timeframes that you would be available for tutoring. * |
| | \bigcirc | 19:00-20:00 |
| | \bigcirc | 20:00-21:00 |
| | \bigcirc | 21:00-22:00 |
| | \bigcirc | 22:00-23:00 |

These are not required questions but here in case you would like to provide further information before the first free consultation.

| 4. What are your expectations from tutoring 5. Please use this box for any other comments you may have |
|---|
| |
| |
| 5. Please use this box for any other comments you may have |
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| . Please use this box for any other comments you may have |
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