



10-Session Learning Plan

Empowering Brilliant Minds to Learn Their Way

Student: _____

Start Date: _____

Student/Parent: Choose exactly **10 sessions** from the calendar — fill Date & Time for chosen days only, leave the rest blank. Track your count: Sessions selected: ____ / 10. **Tutor:** Confirm each session in the record at bottom left. Sunday (tinted) available. Saturday not shown. Sessions expire 60 days from start date.

Wk	Sun	Mon	Tue	Wed	Thu	Fri
1	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____
2	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____
3	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____
4	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____
5	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____
6	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____
7	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____
8	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____
9	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Date _____ Time _____

S.	— Student —		— Tutor Confirms —		
	Date	Time	Attended	Rescheduled	Rescheduled To
1					
2			<input type="checkbox"/>	<input type="checkbox"/>	
3					
4			<input type="checkbox"/>	<input type="checkbox"/>	
5					
6			<input type="checkbox"/>	<input type="checkbox"/>	
7					
8			<input type="checkbox"/>	<input type="checkbox"/>	
9					
10			<input type="checkbox"/>	<input type="checkbox"/>	

Agreement

All sessions expire 60 days from start. By signing, all parties confirm they have read and agree to this policy.

Sessions selected: _____ / 10

Student: _____ Date: _____

Parent/Guardian: _____ Date: _____

Tutor: _____ Date: _____