

English Study Support Tutoring Report

Tutor's name	
Learner's name	
Date and time	
Place	
Number of the session (1 st , 2 nd , etc.)	This is the session.

Please tick the boxes for the following items you've done.

☐ Pronunciation	☐ Vocabulary	☐ Grammar	☐ English conversation
☐ Listening	☐ Reading	☐ Writing	
☐ Other (please specify)			

Learning objectives

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Please share some details on your lessons including activities, learning observations, plans for future classes etc.

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Which sources (websites or texts) were used in the tutoring?

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Next schedule

Date and time	
Place	

If there's anything else you'd like to share, please write it in the space below.

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