

# Student Schedule Planning Form

Use this form to match the hours that a student is available with the hours the agency is open and available for student assistance.

NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

EMAIL: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

CLASS NAME: \_\_\_\_\_ PROFESSOR NAME: \_\_\_\_\_

\*Please indicate all time slots you are available:

|            | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|------------|--------|---------|-----------|----------|--------|----------|
| 8:00 am    |        |         |           |          |        |          |
| 9:00 am    |        |         |           |          |        |          |
| 10:00 am   |        |         |           |          |        |          |
| 11:00 am   |        |         |           |          |        |          |
| 12:00 p.m. |        |         |           |          |        |          |
| 1:00 p.m.  |        |         |           |          |        |          |
| 2:00 p.m.  |        |         |           |          |        |          |
| 3:00 p.m.  |        |         |           |          |        |          |
| 4:00 p.m.  |        |         |           |          |        |          |
| 5:00 p.m.  |        |         |           |          |        |          |
| 6:00 p.m.  |        |         |           |          |        |          |
| 7:00 p.m.  |        |         |           |          |        |          |
| 8:00 p.m.  |        |         |           |          |        |          |
|            |        |         |           |          |        |          |