

Referral Form
ARC/Writing and Reading Center

Name of Student _____
Course _____
Referring Instructor _____

Date _____

I ___ would ___ would not like periodic reports on this student's attendance.

TO THE STUDENT: Please bring this form to the Writing and Reading Center to make an appointment with a peer tutor.

Please help this student with the skills checked below either ___ for a specific assignment or ___ regularly (weekly) for all given assignments.

WRITING:

Development

___ achieving significance/relevance
___ addressing the assignment
___ sufficiently developing
 ___ a thesis
 ___ paragraphs

___ narrowing the topic or focus
___ understanding purpose or audience
___ understanding genre/discipline
 conventions
 other _____

Organization

___ ordering ideas effectively
___ achieving coherence
___ achieving paragraph unity

___ making effective transitions
___ citing sources properly
 other _____

Grammar and Mechanics

___ comma errors
___ sentence fragments
___ sentence run-ons
___ pronoun reference
___ agreement
___ misplaced modifiers
___ punctuation
___ possessives
___ spelling

___ passive voice
___ capitalization
___ using standard English
___ clichés
___ unnatural or confusing phrasing
___ faulty word choice
___ tone, voice
___ achieving sentence variety
 other _____

READING/STUDY SKILLS:

___ reading/analyzing critically
___ reading efficiently
___ reading selectively/appropriately
___ expanding vocabulary
___ taking exams

___ taking notes
 ___ from readings
 ___ from lectures
___ managing time
 other _____

COMMENTS: