Columbus Enrichment Program

What:   FREE One-on-One tutoring*
When:   Every Saturday (per dates below): 10:00 a.m. –Noon
Where:  Second Baptist Church; 1325 10th St. Columbus, IN 47201

2023-2024 Calendar

<table>
<thead>
<tr>
<th>Sessions</th>
<th>Dates</th>
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<tr>
<td>Yearly Plan meeting (10 AM-12 PM)</td>
<td>August 12—</td>
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<tr>
<td>Tutor Training (10 AM-12PM)</td>
<td>August 19</td>
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<tr>
<td>Student Orientation/tutoring</td>
<td>August 26</td>
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<tr>
<td>September Tutoring</td>
<td>9, 16, 23, 30</td>
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<td>October Tutoring</td>
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<td>November Tutoring</td>
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<td>December Tutoring</td>
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<td>January Tutoring</td>
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<td>February Tutoring</td>
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<td>March Tutoring</td>
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<td>April Tutoring</td>
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<td>May Tutoring</td>
<td>4, 11, 18</td>
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Please keep in mind, dates may change due to other issues

*Homework (Academic Curriculum) and Test Taking (Standardized Test *Plus above grade level tutoring
Contact Paulette Roberts for information at 812-371-2257 or pcraulette@sbcglobal.net
Dear Parent/Guardian/Community Member:

You and your child are invited to participate in the Columbus Enrichment Program (CEP).

CEP was established in 2004. It is a FREE individualized tutoring program, for students in grades pre-k-12, and takes place Saturday from 10:00 a.m. to noon at Second Baptist Church (1325 10th Street).

The purpose of CEP is to provide the necessary tools to all students in order to enhance their academic and social capabilities.

The goals of CEP are to:
- Increase student’s knowledge in reading, writing, language arts, mathematics, social studies, science, character and culture
- Engage and inspire students to excel in academic achievement, cultural awareness and social health

For more information, please call 812-342-2722 or email pcrpaulette@sbcglobal.net.

Paulette Roberts
Columbus Enrichment Program Director and Retired Teacher

CEP FREE TUTORING REGISTRATION FORM

The completion of the below form allows:
- Your child to participate in CEP
- The release of your child’s academic information
- Permission to communicate with your child’s school personnel in order to meet your child’s individual learning needs
- Your child to participate in off-site field trips
- Your child to be included in photographs in order to promote CEP

Child’s Name: ____________________________

Parent/Guardian Name: ____________________________

School: ____________________________

Grade: _______ Teacher(s): ____________________________

Mailing Address: __________________________________

________________________________

Phone number and/ or email address: ____________________________

Signature: ____________________________

Completed forms can be returned to 1214 Blackhawk Drive; Columbus, IN 47201 or emailed to pcrpaulette@sbcglobal.net