



## GED Minor & Adult Tutoring Application 2025-2026

Student Name : \_\_\_\_\_ Member #: \_\_\_\_\_

Date: \_\_\_\_\_ Reservation: \_\_\_\_\_

### Check Below (Select One)

- GED Minor  
Or  
 GED Adult

**Email Address to Submit Application:**  
[Tutoring@semtribe.com](mailto:Tutoring@semtribe.com)

Jillian Deien  
TW Tutoring Coordinator  
(954) 989-6840  
Ext. 10501

Jan Bishop  
Tutoring Program Supervisor  
(954) 989-6840  
Ext. 10589

If you have any questions, please contact your local Education Department:

**Big Cypress**  
31000 Josie Billie Highway  
Clewiston, FL 33440  
PH: (863) 902-3200

**Brighton/FLPierce**  
650 Harney Pond Road Suite 112  
Okeechobee, FL 34974  
PH:(863) 763-3572

**Hollywood**  
3100 N. 63rd Avenue  
Hollywood, FL 33024  
H: (954) 989-6840

**Immokalee/Naples**  
295 Stockade Road  
Immokalee, FL 34142  
H: (239) 867-5303

**Tampa**  
6401 Harney Road  
Tampa, FL 33610  
H: (813) 246-3100



SEMINOLE TRIBE OF FLORIDA  
The Education Department  
GED Minor & Adult Application | School Year 2025/2026

**Student Information**

Student's Name: \_\_\_\_\_ Member ID#: \_\_\_\_\_

Phone#: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_  
City State Zip Code

\_\_\_\_\_ Date of Birth Age \_\_\_\_\_

**Previous Education Information:**

---

\_\_\_\_\_ Name of Last School Attended Last Grade Completed or Attended \_\_\_\_\_

\_\_\_\_\_ Date Attended (From) Date Attended (To) \_\_\_\_\_

Tutoring Location (Please check one): Virtual: \_\_\_\_\_ On the Reservation: \_\_\_\_\_ (BC, BR, HW, or IM)  
Other: \_\_\_ Please specify if you checked other for your tutoring location : \_\_\_\_\_

**Emergency Contact Information**

\_\_\_\_\_ Full Name Phone # \_\_\_\_\_

\_\_\_\_\_ Relationship to Student



SEMINOLE TRIBE OF FLORIDA  
The Education Department  
GED Minor & Adult Application |School Year 25.26

**Student Name:** \_\_\_\_\_

The Education Department is pleased that you have decided to take advantage of the Tutoring Program for the 2025 - 2026 school year. Please read, initial, and sign at the bottom. You are acknowledging all policies listed below for optimal program success.

1. I agree that attendance is important to reaching mastery and making academic gains, so I will attend all tutoring sessions on time & be ready to learn. \_\_\_\_\_
2. Tribal member students qualify for four (4) hours of tutoring (adult), (10) hours for a minor. \_\_\_\_\_
3. Attendance is key to success; therefore, students must attend all scheduled tutoring sessions. \_\_\_\_\_
4. Students or parents **MUST** contact the tutor directly with any cancellations or attendance matters within two (2) hours prior to the scheduled session. (Please note, calling the Education Department does not suffice for proper cancellation). \_\_\_\_\_
5. The Education Department reserves the right to withdraw the enrollment of a student who accumulates more than three (3) unexcused absences (No Show). \_\_\_\_\_
6. Students who are eighteen (18) years of age and older will be responsible for reviewing and confirming their own tutoring hours. \_\_\_\_\_
7. GED students have six (6) months to complete the GED program. \_\_\_\_\_

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent/Guardian Print Name, if a minor**

\_\_\_\_\_  
**Signature (if a minor)**

\_\_\_\_\_  
**Date**

For Office Use Only!

Number of Hours: \_\_\_\_\_

Completed by: \_\_\_\_\_

Comments: \_\_\_\_\_

Tutoring Company: \_\_\_\_\_

Tutor Name: \_\_\_\_\_

Date Received: \_\_\_\_\_

Location: \_\_\_\_\_

# SEMINOLE TRIBE OF FLORIDA

**Education Department**  
3100 N. 63<sup>rd</sup> Avenue Hollywood,  
FL 33024

**Phone:** (954) 989-6840 x  
10500 **Fax:** (954) 893-8856  
**Toll Free:** 1-877-592-6537

**WEBSITE:**  
<http://seminoleeducation.com>



## Tribal Officers:

**MARCELLUS W. OSCEOLA JR.**  
Chairman  
**HOLLY TIGER**  
Vice Chairman  
**LaVONNE ROSE**  
Secretary  
**PETER HAHN**  
Treasurer

## GED Commitment Agreement

I, \_\_\_\_\_, agree to the following:

1. Students enrolled in the GED program must spend a minimum of ten (**10**) hours per week tutoring for the GED with the assigned tutor at the Education Department. This ten (**10**) hour requirement is the minimum time that must be spent each week and does not include the time spent taking tests or independent study.
2. There is no rollover of weekly time exceeding the ten (**10**) hour minimum study requirement.
3. There is no make-up of time. Students are not given vacation days. If the center is closed due to a holiday or other, the ten (**10**) hours must be attained during the days the center is open that week.
4. A Signed note from the parent/legal guardian is required to excuse absences due to death in the immediate family and/or clan. An absence due to illness, the parent/legal guardian will be required to present a certified medical note from the student's treating medical provider; otherwise, the absence will be deemed unexcused and submitted to the K 12 Advisor for review. If a GED student is unable to attend a tutoring sessions, the student must provide a valid excuse to the Education Department to continue enrollment in the GED program.
5. Students must display proper behavior when attending a tutoring session.
6. If a student does not enroll in the GED program within five (**5**) business days of dropping out or withdrawing from public, private, charter, or home school, the student will be deemed truant.
7. The parent of the GED student must pay for all testing fees prior to the assessment.
8. If the GED student does not complete the required ten (**10**) hours of study each week, the student will be deemed truant.
9. The student is required to complete the GED program within six (**6**) months unless the student has an IEP and/or the Director of Education has approved for the student to continue the GED process for an additional six (**6**) months.
10. If a GED student does not comply with the GED Commitment Agreement, the student's dividend will be withheld until the student meets the requirements of the Tribal Truancy Policy and recommit to the ten (**10**) hours of tutoring for a period of 30 days.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Education Department Staff Signature

\_\_\_\_\_  
Date