



TUTORIAL SERVICES
 Charleston : 651-5732 Cheyenne : 651-4232
 Henderson : 651-3125

Tutor Application Package

- TUTOR STATUS:**
 New Tutor
 Returning Tutor

In addition to this application, the following materials are required from you:

1. Completed Reference, preferably from a faculty member.
2. Copy of transcripts of all colleges/universities attended.

Please Print

Name: _____ <input type="checkbox"/> Male <input type="checkbox"/> Female				
Last	First	MI		
Address: _____				
No. & Street	City	State	Zip	
Home Phone Number: _____		Cell or Alternative Phone Number: _____		
E-mail address: _____				
Are you fluent in any other language(s) other than English? <input type="radio"/> Yes <input type="radio"/> No				
If yes, please list language(s): _____				
Do you plan to tutor for more than one semester? <input type="radio"/> Yes <input type="radio"/> No				

Cum GPA

Credits Earned

Major

Institution you are currently attending

PLEASE CHECK ALL THAT APPLY:

- Full-Time CSN student (12 or more credits)
- Part-Time CSN student (11 credits or less) Number of credits: _____
- Not currently a student at CSN, but a student at _____
- Employee within NSHE System. Name institution & department _____
- Employed elsewhere. Where _____

Have you previously worked as a tutor? Yes No

PREVIOUS TUTORING/TEACHING HISTORY: List in order, beginning with the most recent position you have held

Job Title & Where	Approx. Start & End Dates	Duties (brief description)

Name of at least one supervisor _____ His/her phone #: _____

PLEASE LIST THE COURSES YOU ARE QUALIFIED TO TUTOR AND WISH TO TUTOR:

COURSE & NUMBER _____

COURSE & NUMBER _____

COURSE & NUMBER _____

COURSE & NUMBER _____

Why do you want to tutor?

Campus You Prefer To Work At:

_____ West Charleston

_____ Cheyenne

_____ Henderson

_____ Other

Applicant's Signature

Today's Date

Please attach to the application to the faculty reference in a sealed and a copy of your most recent college transcripts.

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Tutor Application Reference

Name of Applicant (Please Print): _____

Name of faculty member providing the reference (Please Print): _____

How long have you known the applicant? _____

Please indicate academic areas you feel applicant is qualified to tutor: _____

Please Check:	Above Average	Average	Below Average	Not Able to Assess
Applicant's Command of the Subject to be Tutored				
Applicant's General Interpersonal and Communication Skills				
Personal Assessment of Applicant's Ability to Tutor Given Subject(s)				

Additional Comments: _____

_____	_____
Signature of Faculty Reference	Date
Phone with area code: _____	

Please return to the applicant in a sealed envelope with your signature. Thank you.