State University of New York at Fredonia, Fredonia, New York 14063

COLLEGE TUTORING SERVICES TUTOR APPLICATION for 2018-2019 Academic Year
Please type or print clearly.

Note: Tutors must be matriculated College at Fredonia students and able to work **both** Fall and Spring semesters consecutively.

Current *(Spring 2018)* Class Status: ( ) Fr   ( ) So   ( ) Jr   ( ) Sr   Cumulative GPA: _____

Last Name   First Name   M.I.   Fredonia ID: *(F number)*
_____   F_____

Permanent Address (No. and Street)   City, State, Zip Code   Permanent Phone
_____   _____ _____

Local Address (Room/Dorm or Street)   City, State, Zip Code   Local/Cell Phone
_____   _____ _____

Declared/Intended Major: _____   Declared/Intended Minor: _____

Note: Applicants for English/Writing Tutor positions must have already completed ENGL 455.

Application requirements: Please answer all four questions below. In addition, based on suggestions from past tutors, you are required to work with and/or observe a current tutor during drop-in hours

1. Please list (on a separate sheet) any related experiences which you believe enhance your ability to tutor.

2. Please explain (on a separate sheet) why you decided to apply for a tutoring position.

3. How many hours a week do you plan to devote to another job or internship? _____

4. Are you committed to working a full academic year **(Fall 2018/Spring 2019)** as a CTS tutor?   Yes __ No __
   (if not, explain on a separate sheet)

List the courses/subjects which you feel capable of tutoring in the following format: *(STAT 250; BIO 111)*

Within Your Major   CCC Courses and others outside Your Major
_____ _____   _____ _____
_____ _____   _____ _____
_____ _____   _____ _____
_____ _____   _____ _____
_____ _____   _____ _____

A. Please obtain the signatures of **two faculty members from your department (major only)** who are familiar with your abilities and would be willing to provide a recommendation upon request by College Tutoring Services.

Name _____ Signature _____ Dept. _____

Name _____ Signature _____Dept. _____

B. If interested in tutoring in minor or concentration, secure faculty signature.

Name _____ Signature _____ Dept. _____
* *
For the purpose of reviewing my academic record, College Tutoring Services may obtain a copy of my transcript from the College Registrar.

Applicant Signature _____   Date _____

RETURN COMPLETED APPLICATION TO THE LEARNING CENTER, 4th Floor, Reed Library
Telephone: 673-3550