

MONTCLAIR STATE UNIVERSITY
Center for Academic Development and Assessment

Academic Tutor Application

(Office use)

Date Received: _____

I am applying as: ___ an Employee ___ a Volunteer

Name: _____
Last First

S.S. #: _____

Local Address: _____
Street Apt. #
_____ City State Zip

Tel #: (____) _____

Cell #: (____) _____

Permanent Address: _____
Street Apt. #
_____ City State Zip

Email: _____

Major: _____ Expected Graduation Date: _____
Class: ___ FR., ___ SO., ___ JR., ___ SR., ___ GR. No. of Wkly. Hrs. Avail. To tutor: ___ Min. ___ Max
Previous College(s) Attended: _____

Name Address

Name Address

Master Tutors Only: College: _____ Degree Received ___ Major _____

Cum. GPA: _____ Honors Received _____

Work History:

Place

Date(s)

Duties and Responsibilities

Subject area(s) in which you are qualified to tutor:

List below the courses you have completed in the particular subject area(s) interested in tutoring:

<u>Subject</u>	<u>Course Title and #</u>	<u>Semester Completed</u>	<u>Grade Earned</u>
----------------	---------------------------	---------------------------	---------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please give us the name of three references from who you will request letters of recommendations.

<u>Name</u>	<u>Campus Address</u>	<u>Campus Phone</u>	<u>Subject Area</u>
-------------	-----------------------	---------------------	---------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

How did you find out about the Center for Academic Development and Assessment and the tutorial services?

In a complete paragraph please, tell us:

A. Why are you interested in this position?

B. In your personal opinion, what are the outstanding characteristics of a tutor?

C. How would your previous experiences help you in your position as a tutor?

If employed, I understand that continued employment by the MSU Center for Academic Development and Assessment is contingent upon a performance review and/or continued enrollment as a student. I give permission to the CAD&A office to obtain a copy of my transcript from the Registrars Office at the end of each semester. If a Master Tutor (non-MSU), I will provide the CAD&A office with an official copy of my transcript and three letters of recommendation.

Signature: _____

Date: _____