

Tutor Application

First Name: _____

Last Name: _____

State: _____

City: _____

Street address: _____

ZIP Code: _____

Number of years at Address: _____

Previous State: _____

Previous City: _____

Previous Street: _____

Previous Zip: _____

Email: _____

Cell Phone: _____

Home Phone: _____

Work Phone: _____

Subjects you are qualified to tutor
(Please Circle)

Basic Math

Pre-Algebra

Algebra I

Algebra II

Geometry

Trigonometry

Math Analysis

Pre Calculus

Calculus I

English – middle

English high

School

AP English

Writing

Calculus II	US History
Statistics	European History
	World History
Biology	Art history
AP Biology	Economics
Microbiology	Government
Physiology	
Physics	ESL
Chemistry -	Chinese
inorganic	French
Chemistry -	German
organic	Hebrew
Chinese	Japanese
	Latin
	Spanish
Test Prep	Sign Language
ACT	
PSAT	
SAT	Study Strategies
CAHSEE	Organizational
ISEE	Skills
HSPT	

Please circle grade level(s) you are qualified to tutor

K-5
 6-8
 9-12
 College

Other subjects you can tutor?

Experience with learning disabilities? What kinds?

Years tutoring: _____

Years teaching: _____

Do you have a State Teaching Credential or Teaching License?
 (i.e. EC-6 Generalist, Secondary Mathematics)
 (please choose)

Yes
 No

If yes, What type? : _____

Education

School Attended: _____

Days available: _____

Please provide an overview of your previous teaching or tutoring experience.

What other skills or experiences do you feel would qualify you for employment with Specialized Learning?

Why do you want to work for Specialized Learning?

How many hours per week can you tutor? _____

Do you have your own car? _____

How often do you check your email? _____

Are you willing to drive up to 20 minutes for tutoring assignments?
(please choose)

Yes
No

How long will you reside at your current address? _____

If you move will you stay in the same city?
(please choose)

Yes
No

Do you have a valid driver's license?
(please choose)

Yes
No

Do you have a criminal record (felonies)?

(please choose)

Yes

No

Are you able at the time of employment, to submit verification of your legal right to work in the U.S.?

(please choose)

Yes

No

Education

Undergraduate Education

Degree(s) Attained: _____

University Attended: _____

Did you graduate?

(please choose)

Yes

No

In Progress

Year Completed: _____

Postgraduate Education

Degree(s) Attained: _____

University Attended: _____

Did you graduate? : _____

(please choose)

Yes

No

In Progress

Year Completed

Job History (most recent first)

Job 1

Employer's Name: _____

Employer's Street: _____

Employer's City: _____

Employer's State: _____

Title/Duties

Employment Dates (start to end): _____

Reason for leaving: _____

Name of Supervisor: _____

Supervisor's Email: _____

Supervisor's Phone: _____

May we contact him/her?

(please choose)

Yes

No

Job 2

Employer's Name: _____

Employer's Street: _____

Employer's City: _____

Employer's State: _____

Title/Duties

Employment Dates (start to end): _____

Reason for leaving: _____

Name of Supervisor: _____

Supervisor's Email: _____

Supervisor's Phone: _____

May we contact him/her?

(please choose)

Yes

No

Job 3

Employer's Name: _____

Employer's Street: _____

Employer's City: _____

Employer's State: _____

Title/Duties

Employment Dates (start to end): _____

Reason for leaving: _____

Name of Supervisor: _____

Supervisor's Email: _____

Supervisor's Phone: _____

May we contact him/her?

(please choose)

Yes

No