1. All Learning Assistants must be undergraduate students and have earned an “A” or “B” in all classes they wish to tutor. Learning Assistants must also maintain a minimum cumulative GPA of 2.5 and a major GPA of 3.0. Grades will be verified. Appropriate departmental approval may also be required.

2. Complete and read each section of this application in its entirety, with the exception of the Learning Assistant Reference Check Form, and return to University Tutorial Services, located in room 206 of the University Center.

3. Retrieve and read the Southeast MO State University Student Code of Conduct from www6.semo.edu/judaffairs/code.html

4. Give the Learning Assistant Reference Check Form to an appropriate party along with the provided campus mail marked envelope. University Tutorial Services prefers that you, the applicant, choose a former instructor in the academic area for which you are applying to be your academic reference. Your chosen reference may fill out the Check Form and, using the provided envelope, return the completed form to University Tutorial Services through campus mail.

5. Along with the completed Learning Assistant Application, please provide a complete Student Degree Audit, which is updated through your most recently completed semester. This can be found either on the Southeast Portal under your student tab, labeled DegreeWorks Student, or from your academic advisor.

6. Applications will not be reviewed until all required information has been provided to University Tutorial Services. Once the application process is complete, your application will be reviewed by the University Tutorial Services staff. After review of said application a University Tutorial Services staff member will contact you via e-mail or phone to let you know of your application status.

7. Any questions or concerns should be directed to the Tutorial Services Coordinator, Learning Assistance Programs, or Academic Specialist, TRIO/Student Support Services. Both offices are in the University Center, Room 206: 573-651-2273, tutorialservices@semo.edu

Please keep this page for your records.

(Revised 7/14)
University Tutorial Services
Learning Assistance Programs and TRIO-Student Support Services

Employment Application

Personal Data: (Please Print)

Name: ___________________________________________________________________________
        (Last)     (First)     (MI)

Local Address ___________________________________________________________________
        (#/Apt/Street)     (City)     (State)     (Zip)

Local Phone Number: (______) _____________________________ Voicemail? ____

Best Time To Call: __________________________________________________________________

SE E-Mail: ________________________________________________________________________

Birth Date: ___________________________ Student ID#: ______________________

Tutor Position Applied For: (Specific Subject/s) ______________________________________________________________________

Academic Data: (Please Print)

Classification: Freshman ( ) Sophomore ( ) Junior ( ) Senior ( )

College credits as of last term: __________

Major: ________________________________________________________________________

Cumulative GPA: _______________ GPA (Major): _______________

EDUCATIONAL BACKGROUND:

High School: __________________________________________________________________
        (Name) ___________________________ (Location)

Other Colleges Attended:

        _______________________________________________________________________
        (Name) ___________________________ (Location)
### I AM INTERESTED IN TUTORING STUDENTS IN THE FOLLOWING COURSES:

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<th>Department Approval (office only)</th>
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### EMPLOYMENT HISTORY:

Presently working in another department on campus? Yes_____ No______

If Yes, list the Department(s):

1. ____________________________________________

2. ____________________________________________

If employed in another department, how are you paid?

Monthly (   ) Bi-Monthly (   ) Graduate Asst (   )

### Previous Tutoring Experiences: (list subject matter, dates, department/employer)

1. ____________________________________________

2. ____________________________________________

3. ____________________________________________
Anticipated involvement in campus/work activities next term: (includes hobbies, clubs, organizations, part-time employment, etc.)

1.___________________________________________________________________________
2.___________________________________________________________________________
3.___________________________________________________________________________

Honor Societies, professional memberships, honors/awards: (list membership & offices held)

1.___________________________________________________________________________
2.___________________________________________________________________________
3.___________________________________________________________________________

Academic References:

___________________________________________________________________________
(Name)     (Address)
___________________________________________________________________________
(Phone)     (Relationship)
___________________________________________________________________________
(Name)     (Address)
___________________________________________________________________________
(Phone)     (Relationship)

If selected for this position, I will be able to attend the Tutor Trainings. Yes___    No___

I hereby attest that all the information stated in this application to be truthful and accurate.

Signature: _________________________________
Date: __________________________

(For Office Use Only)

______________________________________________
Contact Date: _______ Initials: _______
University Tutorial Services
Learning Assistance Programs and TRIO-Student Support Services

APPLICATION QUESTIONS

Please answer the following questions:

1. What do you think you would contribute to the tutorial program?

2. How do you see the Learning Assistant position relating to your personal and/or career goals?

3. Please share an experience in which you assisted another student with an academic problem.

4. How do you view your educational experience at Southeast Missouri State University?
University Tutorial Services
Learning Assistance Programs and TRIO-Student Support Services

LEARNING ASSISTANT REFERENCE CHECK FORM

Applicant: ___________________________________________ Reference: ________________________________

Date: ___________ Relationship to Applicant: ______________________________________________________

1. How do you see the applicant contributing to the program? What strengths will he/she bring to the Tutorial Program?

2. Does the applicant complete work in a timely fashion? Is the applicant dependable? What is the quality of his/her work? Are there any areas for improvement? (IF FORMER EMPLOYER: Would you hire the applicant again?)

3. Are there opportunities of which you are aware in which the applicant has worked with members of diverse populations? How did the applicant work within this context?

4. Do you have anything else you would like to share regarding the applicant?

Thank you for your assistance in maintaining the quality of the University Tutorial Program.
Please return this form to: Learning Assistance Programs, 206 University Center, MS1300.